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AN ESSAY

ON THE

DISEASES OF YOUNG WOMEN.

BY

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Das ist eben das wahre Geheimniss das allen vor Augen
Liegt, euch ewig umgibt, aber von keinem gesehn.

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PREFACE.

IN the whole range of physiology, nosology, and metaphysics, there are no more interesting problems than those which are presented to us by Young Women. When the physician who has studied the phenomena of disease as exhibited by adults of both sexes, approaches the bedside of a young woman, he frequently finds himself utterly perplexed and baffled. The rules which he has learnt no longer serve him ; symptoms which he has hitherto considered indicative of mortal disease, appear in this case accompanying quite trivial ailments—everything about the patient is calculated to delude him ; and, accordingly, it very frequently happens that grave errors are committed. Hence hysteria has been called the mocking-bird of nosology ; and well has it earned the appellation. Again ; the jurisconsult who is accustomed to deal with ordinary criminals, coming to consider the crimes committed by young women, finds his axioms all invalidated, and his Acts of Parliament all inapplicable. He discovers that these culprits form a class, which should by

no means be judged by a routine judgment, nor punished with a routine punishment. The metaphysician who seeks to apply his predetermined notions of cause and effect, act and motive, to the class of young women, involves himself quickly in singular embarrassments, and is indeed compelled to modify his ancient theories or to invent new. Considering, therefore, that although the peculiarities manifested by young females, as a class, have been frequently dwelt upon by medical authorities, yet that these peculiarities have always been discussed as isolated problems, and never brought together nor systematised—considering, I say, that no attempt has been made to embrace them all in a general view, I have thought it not unprofitable to collect a variety of cases, illustrative of each affection that presented itself to me, to form a basis upon which, at some future period, a comprehensive theory may be constructed. Such is the principal object which I had in view in publishing this Essay; but the reader will, no doubt, discover, upon a perusal of its pages, other objects, which I hope he will consider of importance.

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FEMALE DISEASES.

CHAPTER I.

EDUCATION AND HABITS OF WOMAN.

Ben mi par di veder ch' al secol nostro
Tanta virtù fra belle donne emerge,
Che può dar opra a carte ed ad inchiostro
Perche ne i futuri anni si disperga;
Et perche, odiose lingue, il mal dir vostro
Con vostra eterna infamia si sommerga,
Et la lor lode appariranno in guisa,
Che di gran lunga avvanzeran Marfisa.

Orland. Furios. Cant. xx.

BEFORE commencing the discussion of the peculiarities of disease, it will be well to consider the peculiarities of health—or the physiological and social distinctions impressed upon the female sex. In early childhood the speciality of the sexes is not yet developed, and the child is only boy or girl by anticipation. At this age the grammatical fiction of a common gender seems realized, or sometimes in this early rehearsal the parts to be performed in the approaching drama are misplaced and inverted. Thus the boy may be the more girlish, and the girl the more boyish of the two: we may behold the latter fired with the spirit of

Alexander, and the former emulating the weakness of patient Grizel. But in a short time all this changes; each assumes his proper and permanent character, and occupies his allotted station. Then we see the boy, returned from some juvenile Waterloo, boastingly exhibit his bleeding nose and blackened eye, while his sympathising sister dresses the honorable bruises with vinegar and brown paper. Then also the boy, cruel to cock-chafers, and persecutor of cats, manifests the same stern resolution which, at some after-period, he may have to display from his seat on the bench, or his chair at the camp-council. His sister, the while, grieves and complains at the barbarity of her brother, nourishing only gentle feelings and world-wide benevolence. The symbol of this sentiment of universal charity is her doll. It is the personification of an idea—it is Good-will, made wood. Some intuition of this fact seems to exist more or less in the breasts of children themselves; at least, if I may judge from a remark made by a little friend, seven years of age, Master P ——. “Mamma,” said the child, “dost thee think that doll is derived from idol? Bessy worships her doll, I am sure, as much as the Israelites worshipped the golden calf.” The child perceived the fact, but, of course, its significance and ultimate tendency were as yet without interpretation.

By these different paths, therefore, the boy and girl advance towards the gates of life: the one in a zigzag course, with great noise and excitement, the other quietly, with equal footsteps, and speedier success. As soon as the portal is passed, and puberty accomplished, a complete moral and physical revolution is effected—menstruation is instituted; and, by a species of harlequinade, the changes immediately commence. The maiden's form, previously angular, and displeasing to the critical eye, is rounded off, inharmonious projections and sharp points disappear; and that charming fulness of contour, and ripeness of development, which marks the transition from maidenhood to womanhood is established. The voice deepens, the throat enlarges, and the breasts swell. The muscles appear conscious of the exalted consequence of the body politic of which they are members, and yield readier obedience to the fiat of the will. Thus a thousand little gaucheries of gait, of gesture, of expression, are obliterated, and the wild motions of youth subside into grace and dignity. The mental constitution undergoes no less alteration. The laughing familiarity of girlhood is succeeded by bashful reserve; even the incorrigible hoyden loses much of her defiant spirit. At the same time the "bloom of young desire" gradually ripens in the soul, the heart

throbs with ill-understood wishes, and a sighing, yearning aspiration extends into the future. All is doubt—all is fantasy—poetry and reverie. In ordinary minds this impulsion of the soul is speedily directed towards an earthly lover—and visions of love in a cottage, maternity, and endless bliss crowd the prospective. To dispositions of a higher mould, the heavens unfold their gates, and reveal their glory. Religious fanaticism is apt to cloud the mind, and mystic love takes the place of a grosser passion. Thus, in Catholic countries, the convents are crowded with the brides of Christ; and thus, in ancient Scandinavia, arose the prophetic Vala. Something of all this is common to man; but in him this period is less strongly characteristic—his fine feelings are quickly corroded by the acid criticism of the world, and his enthusiasm, like the spirit of champagne, evaporates in the free atmosphere of frolic levity.

The menstrual epoch is one peculiarly exposed to the incursions of disease. Should any accident disturb the natural course of the monthly secretion—should it become excessive, or deficient, or fail altogether, or delay its appearance, twenty different maladies are ready to distract the patient. First Chlorosis, with pallid aspect and bruised eye, ereeps up, and tempting the maiden with a savoury morsel of slate-pencil, passes by. Then Hysteria,

the mimie, appears, and assumes in twenty seconds twenty different shapes. First, with tragie ery, and writhing his flexile limbs, he apes the behaviour of Inflammation. Anon, starting to his feet with vehement gesticulation and fluent rant, he plays the part of Madness. Then with folded arms, and eyes nailed to the ground, he stands the personification of Melancholy. In a moment he again changes his character; another change, one more, and he is gone.

Puberty once established, in the natural order of things the female marries, and this third epoch is generally one of care and probation. After a short time the uterus enlarges, and the juices of the mother are drawn off for the nourishment of her offspring. If the woman be ailing and weakly, this state of pregnaney is attended with manifold dangers and distresses; and these dangers and distresses are increased tenfold at the time of delivery. Then, under unfavorable eircumstanees, arise fevers, hemorrhages, convulsions, and sometimes temporary alienation of mind. The perils of childbirth happily evaded, other oocations of disease come into play. Suppression of milk may take place, and milk fever, abscess of the breast, and other easualties, may ensue. Or if 'none of these appear, but the mother, from want of judgment, or from prudential considerations, neglect

to wean her child after the lapse of a reasonable period, the prolonged drain upon the system generates a peculiar malady, which may be denominated the nurse's fever. If, however, the married female escape this penalty of indiscretion, and happen to prove more than ordinarily prolific, even this circumstance will favour the production of various harassing complaints. Local weakness, attended by profuse discharges, displacement of the womb, enlargement of the veins of the lower extremities, flaccidity of the abdomen, aches and pains in the loins and neighbouring regions, are frequently set up. These affections react on the general health, and indigestion, nervousness, uneasiness at the pit of the stomach, flatulent distension of the intestines, constipation, and all its afflictive concomitants appear.

The fourth epoch, that which commences at the turn of life, as it is called, or grand climacteric, and is signalised by suppression of the menses, is far less eventful than the preceding. During this epoch, however, cancer commits extensive ravages, attacking the breast, the womb, or the ovaries. But if the female remain exempt from its attack, this season is one of comparative repose, of quiet, which deepens gradually into the stillness of the grave.

In the above brief sketch of the diseases of woman, it is by no means meant that the maladies

therein enumerated are *limited* to any period of life; thus hysteria may not attack its victim until after marriage or childbirth, and cancer may destroy the youthful patient, and even impress its fatal signature on the new-born infant.

In contrasting the peculiarities of the sexes, it is usual, in works of physiology, to remark that the organism of the female is more delicate, more susceptible of injury, than that of the male. The male, it is supposed, can endure hunger, thirst, fatigue, the inclemency of the weather, and other hardships and vicissitudes, which would overwhelm the female. This is undoubtedly true of artificial society, but I believe it to result in great part from the different training to which the sexes are subjected, rather than to depend upon the organic constitution. A hot-house plant is of course more delicate than a field flower, but the natural powers of the two are the same. Consider the manner in which we, who call ourselves the civilized world, rear our female children. Hardly has the child acquired so much language as to enable it to communicate its wants, and comprehend the injunctions of others, when she is immured in a seminary. Here she is indoctrinated with the first principles of young-ladyism. Her first lesson—and a severe lesson it is—is to sit still and make no noise. Imagine the feelings of a child

condemned to pore over its tattered grammar, or scribble sums upon its slate, while the bright May sun is streaming in at the window, and the noise of rustling leaves, and the merry songs of birds, and the elattering mill-wheel in the distance, seem to call upon their little playmate to desert the gloomy schoolroom, and sport amid the flowers of spring.

At last, however, work is over, and the young ladies are let out to play,—if that can be called play, where freedom of motion there is little, and enjoyment none. Decorum, propriety, and clean pinafores, are the watchwords of the schoolmistress; and her notion of good moral conduct is so severe, that all healthy and mirthful games, which tend to expand the chest and develop the muscles, are condemned as indelicate. But how inexpressibly wearisome is it to a child, whose exuberant spirits should find vent in the wildest motion—in running, shouting, or what else the internal impulse may suggest,—how cruel a punishment is it to this child to perform its gymnastic task, and consume in idle posturing her hours of recreation!

Sometimes the gymnastics are omitted, and the girls are taken out to walk. There they go, rank and file, the tallest girls in the van, the smallest behind, the governess walking beside!

Still there is the same irksome restraint, the same compulsory, and therefore distasteful, and therefore unprofitable, exercise.

How different this from the enthusiasm of cricket, the inspiration of prisoners' bass! The schoolboy throws his whole soul into his game. How proud the position of the best batter or bowler in the school! How enviable the distinction of the fleetest runner!—But the school-girl remains inanimate even in her amusements. Her energies are repressed, and her natural tendencies thwarted by a vicious system of education.

Again, when she returns from her airing, she has to endure the martyrdom of the back-board, a "glaring instance," as Bacon would say, of the preposterous folly of the present educational code. Released from this ingenious instrument of torture, she is perched upon a stool before the piano, and compelled to perform the routine exercises. Here she sits through the long hours; and at length, when the shadows begin to close, drearily quits the instrument, and perhaps throws herself upon a sofa, that her aching fingers and weary spine may recover by repose their exhausted vigour.

Now, when we reflect that of those who are thus treated, not one in a hundred possesses a spark of musical capacity, how can we adequately

express our astonishment that such a system could ever become general? And must we not admit that their education offers a partial explanation of the superior delicacy of the female constitution in civilized countries?

The married state is also comparatively unfavorable to the female. While the husband, in the exercise of his calling, seeks abroad needful intercourse with his fellows, the wife remains at home; and if she happen to be childless, her unoccupied leisure is devoured by ennui, itself the parent of many evils. If she possess children, anxiously occupied with their welfare, she neglects her own, and sacrifices her health to the exacting demands of maternity.

In a perfectly or nearly natural mode of life, I believe that the female system falls little short of the hardihood of the male constitution. In the border-land of civilization—in the backwoods of America, and the unreclaimed forests of Texas—characters like that of Meg Merrilies are by no means uncommon, and these sufficiently vindicate the physical capability of the sex. The fruit-women of Covent Garden, and the fish-women of Boulogne, may also be quoted as examples nearer home. These latter have to walk into the sea as far as the fishing-smacks, and carry to shore upon their backs heavy baskets of fish. They also act

as luggage-porters to the passengers who land at this port. I have seen women carrying to a distance a load heavier than I should have thought it possible for the strongest man to support. These women having to go sometimes a considerable distance into the sea, usually wear garments shorter than would be considered respectable in an opera-dancer. Their legs, thus revealed to view, astonish the beholder. They would excite the envy of a coal-porter or a footman. Such a mass of muscle is strangely discordant to the general idea of feminine delicacy, so much so, that a gentleman once maintained that these daughters of the wave ought to be classed as a third sex, which he proposed to call "Amphibio-female." The fact, however, proves, that when we speak of the delicacy and susceptibility of woman, the remark applies in its full force only to those whom our own singular perversity has rendered so delicate and susceptible.

It may be asked, how I can affirm the natural equality of constitution in the sexes immediately after my enumeration of a long muster-roll of diseases *peculiar* to women. I answer thus. The woman, in addition to the organs common to her and man, possesses a complete system devoted to the elaboration and sustenance of the New Being.

In the presenee, therefore, of morbid causes, the woman, possessing more organs than the man, will of course be so much the more liable to disease; just as two men are more exposed to disease than one man; but place the man and woman together under conditions of health, and they will enjoy equally its blessing. Suppose there existed in one of the Caribbean isles a race of men who possessed no liver. The Briton, living in a congenial climate, and under propitious circumstances, would not of necessity be feebler nor more delicate than the Caribbean islander; but were they exposed together to morbid influences, in addition to the maladies common to both, the Briton would be obnoxious to the whole tribe of hepatic diseases, and yet the validity of their natural constitutions would be equal.

I do not of course assert that the natural muscular powers of the sexes are the same. The female is usually smaller. Her bones have less dimension. Her muscles rarely attain the size of those of man. So far, therefore, her capability of lifting heavy weights, of competing in the race, of sustaining muscular exertion generally, is inferior. But precisely in the same way as the slight frame of the boy is inadequate to a task which the larger frame of the man performs with facility,—precisely

in the same way as the sinewy backwoodsman gains an easy victory in athletic exercises over the slender Siou Indian,—precisely as an Edinburgh *élégant* would succumb in a personal encounter with a fish-wife of the Canongate. But it does not follow that the man is superior to the boy, nor the backwoodsman to the Indian, nor the fish-wife to the *élégant*, in the power of resisting the attacks of disease, merely because they possess a greater bulk of bone and sinew.

There is a cause of disease in females which deserves more than a passing notice. I mean the absurd usage of tight-lacing. Whence our notion of the beauty of a wasp's waist is derived, it is difficult to discover. Certainly the Venus de Medicis does not countenance the idea; nor, in fact, would any artist of taste choose as his model the figure of a fashionable lady, or, if he did, the fashionable lady herself would be shocked at the too-faithful marble. At the Chinese exhibition, lately closed, an elegantly-dressed female, examining the shoe of a mandarin's daughter, exclaimed, "Oh! the barbarism of the Celestial Empire! To admire an ugly deformed foot, like that! One might as well praise the beauty of a sprained wrist or a broken shoulder," and the fair speaker glanced at her own little foot, which peeped beyond the margin of her silk dress. My

own eyes were directed to the lady's waist, and I thought that the daughters of Cathay would have equal reason to wonder at European taste. In truth, this habit of tight-lacing is a thing contrary to anatomy, to physiology, and even to common sense. If the fair lady could inspect, as I have inspected, the distorted chests and twisted ribs, produced by this baneful practice,—if she could see the dislocated heart, the contracted lungs, the obstructed liver, exhibited in females addicted to this habit, she would certainly shrink from its continuance ; or if she persisted in complying with a ridiculous mode, aware of its consequences, I can fancy her exciting the waiting-woman's astonishment by addressing her thus: "Lace that hole a little tighter, Mary ; pull, girl ; the heart must over a little further,—now, more pressure on the lungs—I breathe too freely—I speak too easily ; the lungs must be diminished," and presently, "pinch the liver, Mary ; pinch it, the unfashionable thing !" Nothing excites the bile of the conscientious physician more strongly than this silly corset-mania. He is called in to see a young lady. "She suffers terribly from indigestion, doctor," says her mamma. "Take off her stays," replies the doctor. "Nothing that she eats agrees with her—she has quite lost her appetite," continues mamma. "Take off her

stays," replies the doctör. "She is very subject to lowness of spirits—she sits on the sofa and cries for hours together, it makes me wretched to see her." "Take off her stays." "She fainted only a few minutes before you entered the house—I was obliged to sprinkle her face with cold water and unlace her corset." "Pity you ever laced it, ma'am!" "I have made her a bed on the parlour floor; for if she attempts to walk up a flight of stairs, she is so flurried, and pants quite painfully. I can't think what can be the matter with her." The physician's representation that the corset is the root of all the evil is received with utter incredulity, or even if partially admitted, it is judged better to preserve the young lady's shape than her health.

But the immediate complaints which flow from this pernicious custom sink into insignificance when compared with their ultimate effects. The tight-laced maiden in process of time becomes a tight-laced wife; and then, during the trying period of pregnancy, how are her sufferings aggravated! The abdomen, distended by its burden, encroaches upon and diminishes the capacity of the chest. But this diminution of capacity, which would not at all injure a healthy chest, materially affects one whose capacity has already been diminished by years of compression. The dis-

placed organs are far more susceptible of derangement, and less able to endure pressure. Thus the stomach, pushed by the stays from its proper situation, resents the compression exerted upon it by the enlarged womb, and that uneasiness of stomach natural to the period is exalted into incessant and dangerous vomiting. The disturbed liver is powerfully affected by the same pressure, and jaundice may ensue. The lungs, contracted from their natural size, evidence the additional contraction now produced, by cough and difficulty of breathing, and the heart in like manner becomes subject to distressing palpitation. Some of these symptoms become at times so intense, that in order to save the life of the mother, it may be necessary to procure, by artificial means, the premature expulsion of the child! I call therefore upon those who move in the higher circles of society, and whose example is almost instinctively followed in the humbler ranks of life, to reflect upon the responsibility they incur when they ignore the unanimous decision of the medical faculty, and teach their daughters and granddaughters practically to despise our repeated warnings.

In collecting the various influences which act upon the sexes, and tend to establish that diversity which exists in their diseases, it must not be for-

gotten, that the food taken is an important element in the discussion. Thus man, not only as a general rule lives more highly, but also takes a quantity of food, comparatively as well as absolutely greater than woman. Man is a worshipper at the shrine of Bacchus, but woman frequents the modest temple of Bohea. While man, therefore, is subject to the many diseases begotten of intemperance, woman escapes with comparatively milder punishment. It is foreign to our purpose to enlarge upon the trembling delirium, the overgrown liver, the deranged stomach, the dropsical belly, and other "signs of the beast" impressed upon the confirmed drunkard, but I pass at once to consider what are the effects of that inordinate indulgence in "the cup that cheers but not inebriates," habitual to many of the female sex. I allow fully, that moderate potations of tea or coffee, made not too strong, may be taken, not only without injury, but under certain circumstances, where a stimulant is needed, with benefit. But ladies are exceedingly apt to exceed these limits, and gentlemen also occasionally, but far less commonly than the gentler sex.

Dr. Samuel Johnson was an immoderate tea-drinker; and the late Mr. Hazlitt, whose Essays have been quoted as the triumph of English prose, drank an incredible quantity of tea. Now it is

well known that the great lexicographer, cynical, self-opinionated, overbearing, as he was, was the victim of consuming hypochondriasis. The shadows of death were constantly perceived by his morbid imagination, spread like a pall over the joys and prosperity of life. Wherever he went, Disease and Destruction went with him on each hand, filling his soul with trembling. Each night that he composed himself to sleep, he expected to wake no more. The words "we live in the midst of death" resounded with trumpet-clang in his ear. Hence that abject superstition—those groundless terrors—that intolerant spirit—that *outré* moralism—which exposed this master-mind to the derision of the ignorant vulgar.

It is also related that Hazlitt exhibited certain striking mental peculiarities. He was invincibly averse to society. Nothing could induce him, as he said, to endure the impudent gaze of the well-bred puppy, accompanied, perhaps, by the audible remark, "Gad! a singular animal, that!" or the whisper circulating through the room, "Who is that eccentric personage?" and the mortifying answer, "Only Hazlitt—we must receive him, you know, in spite of his oddities—he is *such* a lion!" And so Hazlitt resolutely refused to enter the circles of society. Only one family, it is stated, he would occasionally, but rarely visit; and

then the restraint was excessive, for if a word was uttered which could by possibility be wrested into an expression of incivility, Hazlitt would seize his hat, and without a single word run from the house. He was eternally involved in quarrels, which generally originated from some unconscious offence committed by his adversary. Irritable, nervous, irascible, inexpressibly sensitive of insult or injury, which he never rested till he had avenged, friendless, and companionless, how is it possible to conceive a more complete wreck of human happiness, a more sorrowful perversion of immortal genius? Now I by no means wish to infer, that the sole cause of these peculiarities, manifested by Johnson and Hazlitt, was the herb of China; for it is clear that a sedentary life, and other concomitants, concurred to produce a very marked effect upon minds and bodies perhaps peculiarly constituted. However, there is the coincidence, if coincidence it be, of two famous tea-topers at the same time famous dyspeptics and hypochondriacs. Among less illustrious characters, many examples of the occasional injurious agency of strong tea or coffee might be quoted. Thus Dr. Watson, in his work on the Practice of Physic, relates the case of a barrister, who, from the fitful character of his pulse, was possessed with the idea that he laboured under organic disease of the heart. Dr. Watson

finding him addicted to strong tea, recommended abstinence from this beverage. The advice was followed, and the patient's pulse became firm and regular.

I have lately met, in the course of my reading, with a curious case, thus described in a work recently published by Dr. Sehmalze, the well-known aurist of Dresden. "Thirteen years ago, Dr. L., a physician of Prag, then in the twenty-second year of his age, being, in consequence of inflammation of the liver, from which he had recently recovered, reduced to a state of extreme nervousness, so that the slightest opposition threw him into a violent passion, accompanied by trembling of the whole body and difficulty of speech, observed that as soon as he drank in the morning strong coffee, he could no longer hear the final syllables of the words he uttered, so that he knew not whether he had actually spoken them or not. At the same time he experienced a sensation as though bladders were bursting in his ears, and the eustachian tube (the channel of communication between the ear and throat) were stopped up. As soon as the bladders in the ear burst he recovered from this state, but in a few seconds fell into it again. These phenomena, which lasted two hours every day, permanently vanished after the lapse of eight weeks. As soon as he ceased

to drink coffee, or drank it only in the afternoon, the malady ceased. He was always excited after drinking coffee, but experienced no convulsion. His hearing was good, and he understood the words of others. He had neither noises nor pain in the ear. He took the cure at Frangenberg, and was completely restored. At present, with the exception of an unimportant local affection, he is quite well. Nevertheless, coffee still exercises a remarkable effect upon him; and recently, having taken two cups of very strong coffee, he experienced fearful anguish, palpitation, inquietude, and trembling of the hands; vomiting of a sour liquid supervened, and in the evening he suffered a febrile attack. These symptoms, however, soon vanished after a strong dose of liquor anodyn. min. Hoffm., so that he slept well on retiring at night to rest.*"

Additional evidence might easily be accumulated, but I imagine sufficient has been said to show that the excessive use of strong tea and coffee conduces to the production of those nervous and dyspeptic and hysterical complaints from which females so generally suffer.

It will not be necessary to do more than allude to the difference of clothing of the sexes;

* *Erfahr. über die Krankheiten des Gehöres*, v. Dr. Eduard Schmalze. Leipzig, 1846.

but it must be pointed out that the habit in which many ladies indulge of wearing shoes with soles scarcely thicker than tissue-paper is extremely injurious. Under such circumstances the feet are liable to get wet; and since it is not always possible immediately to change the shoes and stockings, they remain damp and chilly for a considerable time; and if there be any truth in popular opinion, this is precisely the best recipe to catch a cold. It must be admitted, also, that to dress a young girl in the foggy and variable climate of England in garments which would well suit a Tuscan peasantess, at work in the vineyards, is not exactly in accordance with reason or philosophy. And yet how often is this strange phenomenon exhibited! So also when a young lady goes to a ball, what is her costume? Some filmy texture of cobweb and gossamer, which would hardly protect from the night-chill Titania herself.

However, the excitement of the ball renders her insensible to cold; perhaps the warmth generated by the assembled crowd, and the exercise of dancing, heat and throw her into perspiration. After some hours spent in this way, it is time to depart. In the ante-chamber she feels chilly, and hastens to throw her shawl round her shoulders. Then the carriage is called; but confusion arises, boys run about with torches, policemen are busy,

coachmen quarrel. In the meantime the air is bitter cold, and a shudder runs through the young lady's frame. As she waits, the air seems to grow sharper and sharper, and to freeze her very blood. At last the carriage rolls up; its mistress enters, and is whirled home. But the next morning the physician, hastily summoned, announces to her friends an attack of inflammation of the lungs.

It will now be necessary to say a few words concerning the grand physical characteristic of woman—I mean the menstrual secretion. Every one knows that the thirteenth or fourteenth year is a great epoch in a girl's life. About this time, sometimes earlier and sometimes later, but far more frequently later than earlier, her 'courses' (as they are termed by nurses) are established, and she becomes marriageable. Upon the regular performance of this function her health and happiness seem henceforward to hinge; and it is not until the forty-fifth year of her life that it entirely leaves her. Now it so happens that no action of the economy is so liable to disturbance as this. Upon a slight cause, as fright or other emotion, it may be suppressed instantly, and refuse to return for months or years. On the other hand, it may be excessively increased in quantity, and more resemble the profuse bleeding from a recent

wound than a natural evacuation; or it may be attended with intense pain, and the expulsion of a shreddy membrane. Frequently, accompanying any one of these three varieties, a thick or thinish, opaque or transparent, white mucous flow (leucorrhœa) occurs, and this either in inconsiderable or even in incredibly large quantity. Now, it needs no argument to prove that a periodical bleeding, or a constant exudation of the juices through a leucorrhœal discharge, or a permanently recurring wearing pain, must inflict great injury upon the system; and in fact daily experience corroborates this position. How certainly can the physician, as he passes through the streets of the metropolis, read in the blanched faces and suffering aspects of hundreds a secret history of uterine derangement! He remarks the wrinkles stamped upon the brow of youth, the channels fretted in her cheeks; he observes the nervously hurried gait, the unsteady feeble progression, and recognises the vampire "which at her heart, as from a cup, the life-blood seems to sip."

These derangements, as I have before stated, supervene upon comparatively slight causes. Any cause of bodily debility, any mental or moral agitation is sufficient to induce these baleful results. Hence it may be seen how much more

perniciously morbid influences act upon woman than upon man. In woman, in addition to the effects upon the health generally, a local weakness is set up, consisting, perhaps, of reiterated bleedings. Now these bleedings react upon the system, and infinitely aggravate the prior debility. The increased debility renders, on the other hand, the bleedings more frequent and obstinate; and thus the local and general affections confirm and intensify each other. I have been at some pains to explain the morbid influences of the prevailing modes of female education, and of certain ill-considered habits, as those of tight lacing, of drinking strong tea and coffee, of wearing a minimum of clothing, &c.; but it must be remembered that all these things, as far as they act immediately upon the constitution (and this action is very extensive), are equally injurious to both sexes; but acting also in woman upon a peculiar function, liable to derangement from even slight causes, and exerting, when so deranged, a remarkable effect upon the constitution, they produce in woman many serious disorders which man very easily eludes.

In this work the state of pregnancy and the accidents of delivery can only be noticed as they affect the general system. These are healthy actions, and in a healthy person tend in no way

to generate disease; but in unhealthy persons it is far otherwise. In those greatly debilitated by certain diseases, or congenitally or otherwise malformed, the most disastrous consequences arise. In very feeble and delicate women, the shock of delivery is sometimes, though very rarely, as intense as that of a surgical operation—the amputation of a leg for instance,—and death speedily ensues. In other cases convulsions, loss of consciousness, raving delirium, and temporary insanity occur. Of course slighter affections are much more frequent than the grave symptoms just enumerated; and of course more frequently still, though no absolute disorder is lighted up, yet the constitution remains for a long time in a weakly condition, and a fit recipient for the germs of disease.

There is one consequence of the difference in the mode of life of the two sexes which requires mention. Woman leads a more sedentary life than man, and is therefore more liable to the evils which arise from constipation. Woman is more restrained by the severity of decorum, and is frequently compelled to delay compliance with natural necessities. Hence arise numerous minor maladies, which, although unattended by danger to life, harass the patient with manifold distresses, and contribute their quota to the morbid influences which undermine the constitution.

In concluding this very brief and imperfect sketch of the chief peculiarities, natural and acquired, which distinguish the female sex, I would quote the following remarks of a distinguished physiologist. After remarking that the chief differences in the constitution of the two sexes manifest themselves during the period when marriage becomes proper and desirable, and that these differences chiefly relate to the nervous system and its functions, the learned writer proceeds thus :

“ There is no obvious structural difference in the nervous system of the two sexes, save the inferior size of the cerebral hemisphere (the larger brain) in the female. This difference, which is not observed in other parts of the encephalon (the brain generally), is readily accounted for on the principles formerly stated,—when we compare the psychical character of woman with that of man ; for there can be no doubt that, putting aside the exceptional cases which now and then occur, the intellectual powers of woman are inferior to those of man. Although her perceptive faculties are more acute, her capability of sustained mental exertion is much less ; and though her views are often peculiarly distinguished by clearness and decision, they are generally deficient in that comprehensiveness which is necessary for

their stability. With less of the *volitional* powers than man possesses, she has the emotional and instinctive in a much stronger degree. The emotions, therefore, predominate, and more frequently become the leading springs of action than they are in man. By their direct influence upon the bodily frame, they produce changes in the organic functions which far surpass in degree anything of the same kind that we ordinarily witness in man; and they thus not unfrequently occasion symptoms of an anomalous kind, which are very perplexing to the medical practitioner, but very interesting to the physiological observer. But they also act as powerful motives to the will, and when strongly called forth, produce a degree of vigour and determination, which is very surprising to those who have usually seen the individual under a different aspect. But this vigour being due to the strong excitement of the feelings, and not to any inherent strength of intellect, is only sustained during the persistence of the motive, and fails as soon as it subsides. The feelings of woman being frequently called forth by the occurrences she witnesses around her, are naturally more disinterested than those of man; *his* energy is more concentrated upon one object, and to this his intellect is directed with an earnestness that too frequently either blunts his feelings, or

carries them along in the same channel, thus rendering them selfish. The *intuitive* powers of woman are certainly greater than those of man. Her perceptions are more acute, her apprehension quicker; and she has a remarkable power of interpreting the feelings of others, which gives to her not only a much more ready sympathy with these, but that power of guiding her actions so as to be in accordance with them, which we call *tact*. This tact bears a close correspondence with the *adaptiveness* to particular ends, which we see in instinctive actions. In regard to the inferior developement of her intellectual powers therefore, and in the predominance of the instinctive, woman must be considered as ranking below man; but in the superior purity and elevation of her feelings, she is as highly raised above him. Her whole character, psychical as well as corporeal, is beautifully adapted to supply what is deficient in man, and to elevate and refine those powers which might otherwise be directed to low and selfish objects.”*

* Principles of Human Physiology, by Dr. W. B. Carpenter. Second Edition, p. 729.

CHAPTER II.

CHLOROSIS.

Pallida nò, ma più che neve bianca,
Che senza vento in un bel colle fiocchi ;
Parea posar, come persona stanca.

PETRARCA, *Del Trionfo della Morte.*

CHLOROSIS is the Greek synonyme of that homespun term, familiar to mothers and nurses, the green-sickness. Chlorosis is either acute or chronic. The acute form may be illustrated by the following case. A hale country lass left her native village, and came to London in search of a situation. After undergoing a variety of hardships—buffeted from place to place—incapable of satisfying the exactions of one task-mistress, or of mollifying the ill temper of another—too pretty to please one lady, too ugly to conciliate a second—too quick or too slow, too neat or too slatternly, to suit the taste of her several employers—she at length, after much distress both of mind and body, found herself in the position of that social Helot, a maid of all work: and now her trials redoubled. The common slave of the household, she was expected to obey the orders of all, and be

perhaps in twenty different places at the same moment. Late and early the drudge was at her work: she was up at the peep of day, and her labours, once commenced, and scarcely interrupted to allow her to snatch a scanty meal, terminated rarely before midnight. No wonder then if her health broke down beneath this incessant toil; no wonder, although much ignorant surprise was expressed, if her altered looks indicated the change that had taken place. One morning a strange phenomenon excited the attention of those who knew her. Her cheeks, which the previous evening rivalled in brilliancy of colour "a Catherine pear, the side that's next the sun," suddenly became pallid and bloodless, and her lips exchanged the tint of the cherry for that of the lilac blossom—she had become chlorotic.

But this malady does not always manifest itself so suddenly. Its advance is sometimes dilatory and insidious. The following sketch will furnish an example of this form of the disease. A young lady, intellectual and given to reading, and excited by the admiration of her friends, devotes herself ardently to study. If she possess musical talent, her harp, or guitar, or piano engrosses the time that should be spent in the open air, and in healthful exercise. If she paint, her hours are consumed before the easel, and the noxious

emanations of the oil-colours are absorbed by the system. If she dedicate herself to the languages, she too often forgets, in converse with the dead, the duties of the living, nor remembers that there is no pardon for those who infringe the covenant between Man and Nature. The day thus spent in preparation, the night is spent in display. Then her various accomplishments are exhibited; then she sings, plays, dances, or converses, and is rewarded by whisperings of praise, which make her cheeks glow and her bosom flutter. At length the festivity begins to flag, and the guests one by one depart. The lamps are put out and the shutters closed, and the maiden retires to her chamber. *There*, as she languidly removes the roses from her hair, and the jewels from her arm, something whispers her that accomplishments are not health, nor applause happiness, and that Destiny may weave a brighter fate than that of a Sappho or a Corinne. Her limbs exhausted by fatigue, her mind out of tune, and her temper quickened into fretfulness, she has scarcely patience to allow the removal of her gay attire before precipitating herself upon the bed: and when she falls asleep, her slumbers are not sound nor refreshing. Her excited brain refuses to be quieted; a chaotic imagery, made up of scenes from which she has just escaped, of early asso-

ciations, and of expected events, bewilder the sleeper; or shapes and sounds of horror startle her imagination; or multitudinous ideas, in themselves neither new nor rare, chase each other with dizzy rapidity, so that the period of unconsciousness appears to endure a century. In this manner "hoon Nature's sweet restorer" is divested of half its blessing. When, therefore, this young lady is observed to become paler than ordinary, and to exhibit the characteristic halo around the eyes, what else could be expected? What else, when her strength diminishes, when her appetite fails, when her bowels are disordered? What else, when her spirits flag, when head and heart ache in unison—when society, once eagerly sought, becomes hateful to her—when her temper becomes capricious, fretful, and thankless—when languor, and debility, and misanthropy compel her to observe an inactive solitude? We cannot wonder seeing her oppressed by a thousand ills. Thus her respiration is affected by slight exertions; and in mounting a staircase, she is obliged to rest frequently and take breath. A trifling surprise, the approach of a stranger, any unusual noise, a mild rebuke, and many other causes which would scarcely, or not at all, affect a person in health, produce extraordinary emotion, trembling, tears, and violent

palpitation of the heart. This palpitation is sometimes most distressing, and not seldom leads to unfounded belief in the existence of organic disease. Swelling of the ankles comes on during the day, but disappears after a night's repose. Such is a full-length portrait of confirmed chlorosis, but with some slight incompleteness of detail, which requires now to be filled up.

First, as regards the appetite. The appetite may be voracious, or deficient, or capricious, and in rare cases it is unaffected. By capricious appetite I mean voracity alternating with deficient appetite, as well as that strange symptom, which the faculty christen *pica*, or the magpie. Thus, a chlorotic girl will take an unaccountable fancy for the most indigestible and even revolting articles. She may take a liking for slate-pencil, for sealing-wax, for lumps of chalk, for coal, or for lucifer matches. One patient will be eternally nibbling the contents of her work-basket, while a second prefers the pungency of smelling salts, and a third will eat nothing but the best stearine candles. This singular habit is thus cleverly hit off in a letter in the *Spectator*:

“MR. SPEC.—I grew tall and wild at my mother's, who is a gay widow, and did not care for showing me, till about two years and a half

ago ; at which time my guardian unele sent me to a boarding-school, with orders to contradict me in nothing, for I had been misused enough already. I had not been there above a month, when being in the kitchen, I saw some oatmeal on the dresser ; I put two or three corns in my mouth, liked it, stole a handful, went into my chamber, chewed it, and for two months after never failed taking toll of every pennyworth of oatmeal that came into the house ; but one day playing with a tobacco-pipe between my teeth, it happened to break in my mouth, and the spitting out of the pieces left such a delicious roughness on my tongue, that I could not be satisfied till I had champed up the remaining part of the pipe. I forsook the oatmeal, and stuck to the pipes three months, in which time I had dispensed with thirty-seven foul pipes all to the bowls : they belonged to an old gentleman, father to my governess. He looked up the clean ones. I left off eating of pipes, and took to licking of chalk. I was soon tired of this. I then nibbled all the red wax of our last ball tickets, and three weeks after, the black wax from the burying tickets of the old gentleman. Two months after this I lived upon thunderbolts, a certain long round bluish stone which I found upon the ground in our garden. I was wonderfully delighted with this ; but thunderbolts growing scarce, I fastened

tooth and nail upon our garden wall, which I stuek to almost a twelvemonth, and had in that time peeled and devoured half a foot towards our neighbour's yard. I now thought myself the happiest ereature in the world; and I believe in my conscienee, I had eaten quite through, had I had it in my chamber; but now I became lazy and unwilling to stir, and was obliged to seek food nearer home. I then took a strange hankering to coals; I fell to scrunching them, and had already consumed as much as would have dressed my wedding dinner, when my unele came for me home; I was in the parlour with my governess when I was ealled down. I went in, fell on my knees, for he made me call him father; and when I expected the blessing I asked, the good gentleman in a surprise turns himself to my governess, and asks whether this (pointing to me) was his daughter? 'This,' added he, 'is the very pieture of death. My ehild was a plump-faeed, hale, fresh-eoloured girl; but this looks as if she were half-starved, a merc skeleton.' My governess, who is really a good woman, assured my father I had wanted for nothing; and withal told him, I was continually eating some trash or other, and that I was almost eaten up with the green-siekness, her orders being never to cross me. But this magnified but little with my father, who presently in a kind of pet,

paying for my board, took me home with him. I had not been long at home, but one Sunday at church (I shall never forget it) I saw a young neighbouring gentleman that pleased me hugely; I liked him of all men I ever saw in my life, and began to wish I could be as pleasing to him. The very next day he came with his father a visiting to our house: we were left alone together, with directions on both sides to be in love with one another; and in three weeks' time we were married. I regained my former health and complexion, and am now as happy as the day is long. Now, Mr. Spee., I desire you would find out some name for these craving damsels, whether dignified or distinguished under some or all of the following denominations: to wit, 'Trash-eaters, oatmeal-chewers, pipe-champers, chalk-liekers, wax-nibblers, coal-serunchers, wall-peelers, or gravel-diggers;' and, good Sir, do your utmost endeavour to prevent (by exposing) this unaccountable folly, so prevailing among the young ones of our sex, who may not meet with such sudden good luck, as,

Sir, your constant reader,

and very humble servant,

SABINA GREEN,

NOW SABINA RENTFREE."

The functions of the stomach and bowels are

almost invariably deranged. Flatulent distension of the abdomen, indicated by visible protuberance, a hollow drum-like sound (elicited on tapping the belly with the finger), and frequently by habitual eructation, or constant rumblings (which sometimes form so prominent a feature as to prevent the patient from entering into society), is a symptom rarely absent. Acidity, pain at the pit of the stomach, heartburn, occasional sickness, or vomiting of a clear watery fluid, with an intensely sour taste, offensive breath, a pallid indented tongue, and other symptoms of disordered digestion, harass the sufferer.

Occasionally blood is vomited. Sometimes this symptom (in cases where the monthly secretion is suspended) may result from an effort on the part of the stomach to perform the function of the uterus. In cases of this kind the bloody vomiting will usually be periodical, and occur only at those times when the menses fall due; but in other cases the vomiting of blood occurs quite irregularly, and then I believe it to depend upon ulceration of the lining coat of the stomach. Very frequently, in examining the stomachs of persons who die from various diseases, we find scars of larger or smaller diameter, evidently the relics of healed ulcers: moreover, we know that young women are especially liable to ulceration of the

stomach. Hence it seems probable that, in cases such as that which I proceed to quote from Dr. Watson, actual ulceration of the stomach existed at one time ; but the ulcer ultimately cicatrized, and the patient recovered.

“A romantic girl was for some *months* under my care in the hospital. She vomited such quantities of dark blood (which did not coagulate however) as I would not have believed, if I had not seen them. Day after day there were potsful of this stuff ; yet she did not lose flesh, and she menstruated regularly ; and, what was very curious, the vomiting was always suspended during the menstrual period, and recurred again as soon as the natural discharge ceased. I said she was romantic ; but I should rather have said that she had that peculiar mental constitution which belongs to hysterical females. She used to write me long letters of thanks for my attention, though I was heartily tired of her, and these were couched in all the fine language of the Minerva press. At last I sent her away, just as bad as when she came into the hospital. This was five or six years ago ; but last year she called at my house with a present of game, and told me she had got married to a hair-dresser, and was quite recovered.”

The bowels are sometimes constipated and sometimes relaxed.

The disturbance of the heart and lungs is sufficiently manifested by the shortness of breath, and inordinate action of the heart upon slight exertion. But this condition is not present during repose, for persons of a languid circulation are very prone to chlorosis; and, the disease once established, this languor is increased rather than diminished. Hence we frequently find the chlorotic invalid with a slow pulse, not exceeding forty or fifty beats per minute, with frigid, chilblained hands and feet, and cholera noses.

The blood is poor and watery. If, after it be drawn from a vein, it be immediately inspected, instead of the rich purple colour which it naturally exhibits, it more resembles the thin juice of the cherry. It is this property of the blood which gives rise to a strange murmur in the veins, which the French have christened *bruit de diable*. If the ear be applied, through the medium of a piece of wood, or other conductor of sound, to the jugular vein of a chlorotic patient, a sound will be heard similar to that which appears to reverberate through certain convolute shells, when shaken, and applied to the ear :

“ Shake one and it awakens ; then apply
Its polished lips to your attentive ear,
And it remembers its august abodes,
And murmurs as the ocean murmured there.”

So if we listen to the sounds of the heart, we shall frequently detect a peculiarity connected with the first sound, or that which is synchronous with the pulse. The sound is not pure, but is attended with a soft accompaniment, which has been compared by Dr. T. Addison to the sound produced by tearing cotton. The "tearing-cotton murmur" is a familiar phrase at Guy's Hospital.

It is the impoverished condition of the blood that causes the peculiar aspect observed in chlorosis. Sometimes a girl is merely a little paler than usual, sometimes she is blanched as white as a lily; but in both cases it is common to observe a greenish circle, or dusky discoloration and puffiness, beneath the lower eyelids, similar to that which is apt to occur after long weeping. But the aspect is not always merely pallid: the pallor may be mixed with a greenish or yellowish, a sallow or dingy, a chalky, or waxen, or bilious tint; and in some of these cases the liver is unjustly suspected, and mercurial remedies exhibited, to the serious detriment of the patient. But there are peculiarities in the countenance of a chlorotic female, independently of her anomalous complexion: there is the pearly eye, the dilated and sluggish pupil, the side glance of causeless apprehension. As she stands before the physician, he observes her dejected eyelid, the nervous motion

of her fingers, the heavy respiration and frequent sigh, and when he puts his finger upon her wrist, the unsteady but galloping pulse.

The head is the seat of various distressing symptoms, of which the most common is severe and long continued headache. This affection is relieved by the recumbent position, and by diminishing the height of the pillows. Giddiness, ringing in the ears, floating specks before the eyes, sometimes impaired vision, and frequent faintings, attend upon the disease.

In the worst form of the complaint, the skin loses its natural elasticity, and becomes harsh and brittle; the nails are rough, and have a tendency to split; the hair loses its glossy character, becoming dry and crisp, changes colour, and not unfrequently falls off in large masses.

Sometimes livid blotches, or blood-spots, disfigure the surface of the body, appearing more frequently upon the lower than upper extremities. I have also occasionally seen various cutaneous eruptions, apparently connected with this complaint. In one girl, a patient of Mr. Aston Key, the eruption was general, and bore a striking resemblance to the itch; but a minute examination, the history of the case, and the fact that it was cured by remedies which have no remedial influence over the itch, sufficed to distinguish it.

I may also allude to another symptom, which I admit to be, as far as I have yet ascertained, of comparatively rare occurrence; but I suspect that if attention be directed to the point, it will occasionally be detected—I mean engorgement of the spleen. The class of cases in which I have noticed fulness, and a dull sound on striking with the finger over the splenic region, is that in which palpitation and difficulty of breathing are prominent symptoms. In these cases the access of blood to the organs of the chest is impeded, and congestion of the abdominal organs would occur, were it not that the spleen, a many-chambered, distensible, elastic bag, receives the overplus of blood into its cavities, and thus relieves the more important organs from oppression. In this turgid state it may sometimes be distinctly felt by manipulating the abdomen. Of this I remember a remarkable instance in a young woman, twenty-one years of age, named Louisa Burgess, who lay some time in the clinical ward of Guy's Hospital, under the care of Dr. T. Addison. She was chlorotic, complained of pain under the left breast, difficulty of breathing, distressing palpitation, and pain in her legs; she was also the subject of cough, attended with expectoration. On applying the ear to the chest, the "tearing cotton" was heard. The enlargement of the spleen was plainly

perceptible. She had no symptoms of ague. Her residence was Bexley, Kent.

Another rare symptom is jaundice. The following case, which I observed during my pupilage at Guy's Hospital, seems worthy of abbreviation from my note-book. A girl of about twenty, belonging to that degraded class so numerous in great cities, was admitted into the hospital, under the care of Dr. Barlow. A certain amount of attention was directed to her case, for she possessed a remarkably fine Grecian countenance, with liquid blue eyes, and a certain serene expression, which, although debased by vice, and disparaged by the lightest shade of jaundice, was yet singularly attractive. She was chlorotic, and as the jaundice wore away, the marble whiteness of the skin shone out conspicuously. Ultimately she was cured, and sent to the Magdalen Asylum.

In chlorosis the menstrual secretion, if not entirely suppressed, is scanty, continuing to flow only for a few hours, and is pale, watery, and offensive. Nevertheless, cases every now and then occur, as has been lately pointed out by M. Trousseau, in which the flow is excessive. This constitutes one remarkable form of menorrhagia.

The mind, as I have before stated, suffers a singular perversion. A settled gloom oppresses the once vivacious and mirthful disposition; an

unwonted irritability of temper, a snappish, morose, or sarcastic mode of speech, a neglect of the duties assigned to her, disrespect and contempt of those to whom she is bound by the greatest obligations, and many other eccentricities, are sometimes observable, and create much misplaced indignation in those who are ignorant of the nature and course of this disease.

It must not be supposed that all the symptoms which I have depicted ever coexist; almost every individual case presents some peculiarity in their number and combination. As the causes which favour the production of the disease, and the constitution of patients vary infinitely, so the appearances of the disease vary infinitely. In one case one symptom will be strikingly prominent, in another case another. One patient is plagued by the magpie appetite, another by loud rumblings and flatulence of the abdomen, a third by troublesome sickness, a fourth by palpitation, a fifth longs to regain the faded carnation of her cheeks, a sixth is humiliated by that unamiable perversion of temper and talent, the source of which is a mystery to herself.

Chlorosis is very rarely fatal itself; but by the debility which it induces, when of long standing, it not uncommonly leads to the production of secondary diseases, which kill the patient. Thus,

when the chlorotic maiden belongs to a scrofulous family, or when she herself possesses the violet eye or rufous hair, or other indication of the scrofulous temperament, *then* the white-sickness should be regarded with grave alarm, for there is no doubt but that in many cases it excites into active vegetation the dormant germ of consumption.

In connexion with this point, let me quote Dr. Ashwell's truthful portrait of this complication:—"From what I have seen," he says, "I am convinced that structural disease of the lung is most frequently connected either with chlorosis alone, or with chlorosis in connexion with amenorrhœa. For instance, a girl of consumptive family, arriving at the age of puberty, becomes slightly chlorotic, and soon, instead of the negatively morbid state which may have existed up to this period, there creeps on slowly, but certainly, a confirmation of the disease: there is no menstruation, or, if the function be developed, it is only once or twice, and very imperfectly. Then there is great cause for apprehension, not that the series of symptoms belonging to the other complications will occur, but rather that the anæmia and want of constitutional power will favour the predisposition to structural pulmonary change. Such patients are not altogether

without appetite; the derangements of the stomach and the alimentary canal are not prominent symptoms, the cerebrum does not painfully sympathise, and frequently there is an entire absence of hysteria; but there is quickness of pulse, irregular action of the heart, rapidity and difficulty of respiration, more or less thoracic pain, frequently confined to the left side, a short hacking cough, and emaciation. Inquire particularly, and it will sometimes be found that there is in slight degree both expectoration and perspiration. When patients have arrived so far, and sometimes, happily, before they have reached this point, apprehension is roused, and medical treatment is eagerly sought. Many such cases are occurring; and I wish the attention of practitioners to be particularly directed to this complication. The vicissitudes of an English climate predispose to phthisical disease; and with the physiological circumstances peculiar to the sex, explain how it is that girls so frequently die at this epoch of phthisis, in connexion with chlorosis and amenorrhœa. If asked what such a series of symptoms as I have just enumerated indicate, the reply must be, chlorosis, complicated with a tendency to phthisis; and if it be inquired what is the chance of entire recovery, a very guarded answer must be given."

The second mode in which chlorosis may prove fatal is, by inducing slow inflammation and ulceration of the stomach. The following case, which occurred at Guy's Hospital, will illustrate this point. A young woman was admitted, suffering from what the physician who attended her called "waxy chlorosis." It was the worst case which at that time I had ever seen. The countenance I could only compare to those ghastly faces which I had seen as a schoolboy on Christmas-eve, when, after the consumption of the plums and termination of the snap-dragon, a handful of salt was thrown into the flaming spirit, and every spectator laughed and pointed at the unearthly aspect of his neighbour. Such was the appearance of this girl. Her frame was emaciated, and the last spark of bodily and mental vigour seemed extinct. She remained some time in the ward, and improved considerably; but one afternoon, in the absence of the physician, the apothecary of the hospital was suddenly called to see her. He found her complaining of excruciating pain in the belly, and immediately adopted appropriate measures of relief; but within twenty-four hours she died. Upon dissection, we discovered a hole, about the size of sixpence, through the stomach. By this aperture a quantity of half-liquefied food had escap'd into the general cavity of the belly,

and set up that terrible inflammation, which had so rapidly extinguished life. The cause of the hole was evidently slow inflammation. Doubtless the corrosion of the wall of the stomach had been very slow, for the patient had never complained of the slightest pain in the organ ; but the instant that the perforation was complete, the food escaped, and intense inflammation of the tissues external to the stomach, accompanied by violent pain, was lighted up.

Causes.—The causes of chlorosis are thus enumerated by Dr. Copland: “The lymphatic and melancholic temperament; feeble and delicate constitutions ; residence in cold, moist, and marshy localities and climates ; insufficient, unwholesome, innutritious, and watery, vegetable food ; inattention to the digestive functions, particularly those of the bowels ; the abuse of diluents, of acid weak wines, or of spirituous liquors early in life ; too great indulgence in warm bathing ; prolonged sleep ; tight lacing at an early age, and whatever debilitates and relaxes the system, *predispose* to this disease. The most frequent causes are sedentary occupations in crowded and ill-ventilated manufactories and towns, especially those employments which require a stooping position, and are prosecuted by females at a very early age, or before the frame is developed. The more common

exciting causes are, longings after objects of desire, depressing passions and affections, especially unrequited love, or unfortunate or imprudent attachments; long-entertained feelings of sadness or anxiety, particularly when caused by removal from friends, and the scenes of recent happiness and affection. The influence of constipation and fecal collections in the cæcum and colon in occasioning the disease cannot be questioned."

Now, although the causes just enumerated are unquestionably competent to excite the disease, yet in the majority of instances the causes are reducible to two, viz. sedentary life and nervous depression; and of the two the latter is greatly more influential than the former. Take two young women of equal physical power, and confine them in a factory, what will be their condition in six months' time? Very probably the one will retain a considerable amount of health, while the other is more or less chlorotic. Inquire into the private history of these two girls, and you will generally be able to explain the difference. The one has a happy home, perhaps, affectionate parents, loving sisters. She is inspired by the consolations of religion, and however laborious her occupation and scanty her pittance, her quiet and composed mind enables her to endure her troubles with fortitude. But the other girl is of a more

rebellious spirit. Her parents may have seen better days, and brought her up in the privileges of a higher station ; and now condemned to earn her livelihood by manual labour, her proud heart frets and chafes at the degradation. She becomes chlorotic. In time the unhealthy influence of a factory life would overtake the happy as well as the unhappy ; but it would require a much longer period, and would even then inflict less injury on the constitution.

Again: a young Frenchwoman, gifted with the national *gaité du cœur*, undertook the charge of an English nobleman's children, and left her parents and country to reside with her pupils near a distant village in England. At first her spirits were high. She would romp with the little girls in the green fields, and chatter and laugh with them, and seemed as happy as a bird. But all this soon changed. She began to speak of our cold and fickle climate, and contrast it with that of "la belle France." She grew less fond of the children, less loquacious, less active. She began to immure herself in her chamber, and remain there for hours together. She grew pale and thin, and peevish and taciturn. At last the household perceived that the poor exile was pining for her native land, and preparations were made to restore her to her country. The intelligence acted like a

charm upon her ; and before she set foot on the vessel which was to carry her home, her spirits and colour had returned, and that fulness of contour, proper to her age, was completely re-established. This case exhibited that form of chlorosis which has been designated *mal de pays*—home-sickness—*calenture*—that homeward longing, so pathetically expressed by Béranger in the Lament of Marie Stuart ; so intensely excited in the Swiss by the *Ranz des Vaches* ; and which so frequently and powerfully affects those condemned to wander from that “ cherished spot, we ne’er forget, though there we are forgot !”

Unrequited affection, the perfidy of a lover, or an attachment interrupted or broken off, frequently excites chlorosis, which, when it depends upon such causes, is termed by the French *fièvre d’amour*,—the fever of love. How beautifully is this malady described by our great dramatist ! Listen only to the words of Viola :

“ She never told her love ;
 But let Concealment like a worm i’ the bud
 Prey on her damask cheek ; she pined in thought ;
 And, with a green and yellow melancholy,
 She sat like Patience on a monument,
 Smiling at grief !”

This cause, indeed, has been universally recognised from the earliest ages. Cases of the kind are so common, that they require but brief men-

tion. I will quote, however, one instance. I knew a young lady, who, almost on the eve of her marriage, discovered that her proposed husband was involved in an illicit connexion. She therefore peremptorily rejected his addresses, but she could not with equal facility erase the impression he had made upon her heart, and her friends beheld her gradually but uncomplainingly pine away. The colour forsook her cheeks, society had lost its charm, the converse of her former acquaintance was tedious and insufferable to her, nothing had power to occupy her attention but what referred to her past happiness—she became, in fact, chlorotic. Things had long remained in this situation when a young cousin, a lieutenant in the navy, arrived on a visit to the family. It so happened that he also had been jilted by a faithless mistress; and the idea arose in a certain scheming head, that it was possible to turn this accident to their mutual advantage. A plan was formed and carried into execution. The young people were brought frequently together; and, as was expected, the naval hero spoke frequently, and with great fervour, of his misfortune. The lady at first listened languidly, and without interest, but soon her sympathy was excited, and she exerted all her eloquence to console the victim of perfidy similar to that which had caused her own woe. Insensibly

her representations prevailed—her cousin forgot his sorrows ; and to prove the sincerity of his conversion, offered his hand to his fair adviser. The result may be anticipated. A faint refusal at first—then a demand for time to consider the proposal—and ultimately acceptance and a joyful wedding. And thus the benevolent plot entirely succeeded in restoring the young lady to health and happiness.

But the grand passions are not alone powerful in producing this disorder. The minor troubles of life—*les petites misères*—have the same effect. A young person, secluded from the companionship of her equals, debarred from the amusements becoming her age and condition, and subjected to over-rigid governance, easily falls into the “green and yellow melancholy.” A young girl kept in close attendance upon the aged or infirm, and compelled to endure the fretful caprice and selfish exaction which are too frequently lavished upon those in her situation, is exceedingly prone to chlorosis ; and in short, any continuous irritation, or tension, or depression, or exaltation of the mind has the same tendency.

CHAPTER III.

REGULAR AND IRREGULAR HYSTERICS.

Noi sem venuti al luogo, ov'io t'ho detto,
Che tu vedrai le genti dolorose,
Ch'hanno perduto il ben dello intelletto.

* * * *

Quivi sospiri, pianti, ed alti guai
Risonavan per l'aer senza stelle,
Pereh' io al eomineiar ne lagrimai.
Diverse lingue, orribili favelle,
Parole di dolore, accenti d'ira,
Voci alte e fioche e suon di man con elle
Facevano un tumulto, il qual s'aggira
Sempre in quell'aria senza tempo tinta,
Come la rena, quando il turbo spira.

DANTE, *Dell' Inferno*, Canto iii.

THERE exists a peculiar disease, more common among females than males, which medical writers recognise by the name of Hysteria. It resides in great cities, and visits, though not impartially, all classes of the community. It attaches itself particularly to the noble and opulent, it is well-known among the *bourgeoisie*; and not unfrequently, though far more rarely, it associates with the industrial poor. It is in some measure the barometer of national prosperity. During seasons

of commercial pressure, when credit fluctuates, or the panic, engendered by the bursting of some huge bubble, prevails; in times of speculation, when large fortunes are suddenly made and suddenly lost; when suicide is rife, and the gaols are crowded with criminals; when questions of organic reform agitate society,—then hysteria is most widely diffused, and is only repelled within a narrower compass by the restoration of public equanimity. But when the national mind is possessed with a sublime idea, whether religious, patriotic, or social, and projects in its mighty enthusiasm the regeneration of mankind, then the disease wonderfully diminishes, and all but vanishes from view. This fact was particularly remarked during the first French revolution, and during the Irish rebellion. It was also noticed by Cullen during the civil war which raged in Scotland in 1745-6; and Dr. Rush has recorded that the same phenomenon signalled the American war of independence. Hysteria is rarely found in rural districts. The mountain breezes, the fragrance of flowers, the quietude of Nature, the glad voices of birds, are fatal to it.

A person is said to possess the Mobile Constitution, in whom the emotions are strong and the will feeble. Such a person is usually said to exhibit a weak or ill-regulated mind. Such a person, though

frequently self-willed and obstinate, will generally submit to the guidance of one whose character is marked by that equilibrium in which his own is deficient. He will, it is true, frequently rebel, and under the influence of violent excitement become perfectly unmanageable, but this once subsided, his unstable temper easily yields to the instances of his more constant friends. The mobile character is therefore the peculiar victim of imposition, and the chosen tool of villany. An appeal to his pocket through his sympathies is rarely unsuccessful, and to save a professed friend he will sacrifice his reputation and his happiness. He is led by momentary excitement to commit acts which his cooler reason would abhor or despise, and accordingly we find him at one time a "Raüber Moor," at another a "Charles Surface," at another a "Spring-heel'd Jack." His temper is convivial, and his sense of honour often ridiculously refined. His acts are determined by impulse, and never by calm reflection. Let him hear a tale of distress, and he hastens to relieve it; let him discover an act of injustice, and he sallies forth to enforce redress; let an insult be offered him, and he takes instant revenge; oblige him and he swears eternal gratitude, offend him, and you excite his intense hatred. His affections are ardent, but as fickle as fortune.

This mutability of temper is frequently accompanied by great versatility of talent, which, were its possessor endowed with corresponding powers of application, would raise him to a high position among the instructors and benefactors of mankind. But it too frequently happens that his talents are misapplied or frittered away, and he either sinks at last, like Will Honeycomb, into the humble companion of Sir Roger, or, like the Lucian Gay of D'Israeli, expends his brilliant intellect for the amusement of the gay world. Occasionally, however, reformation is effected, generally under the influence of some strong motive, and the mobile mind attains a certain *aplomb* and stability. Of this we have a remarkable instance in our own Prince Hal.

I have described the mobile constitution in man, but it is far more general and potent in woman, in whom it seems to descend from the mind into the organic frame, and to involve every fibre, every vessel, every nerve, in functional perplexity. There is the same variable temper, and high but fleeting emotion, the same impressionability and vacillation of purpose, the same romantic scheming, and sublime contempt of sober calculation; but in women this mobility is physical also; the muscles and arteries and nerves quiver with exalted sensibility; each member of the body

corporate, when excited, manifests through its peculiar function disproportionate agitation ; and this is that condition of body and mind, “for which,” says Dr. Alison, “we have no more precise or definite expression than nervous irritability or mobility ; a condition which is more common in women and children than in men, and more common in all persons when in a state of weakness, than when in the full enjoyment of muscular strength ; in women particularly more common about the menstrual periods, and immediately after delivery, than at other times ; more common likewise in those in whom the monthly discharge is habitually *excessive* or *alter’d*, as in *leucorrhœa*, or suddenly *suppressed*, or more gradually obstructed in the different forms of *amenorrhœa*, than in others. In this condition of mobility, both sensations and emotions are intensely felt, and their agency on the body is stronger and more lasting than usual ; continued voluntary efforts of mind, and steady or sustained exertions of the voluntary muscles, are difficult or impossible ; the muscular motions are usually rapid and irregular, and the ‘animus nec sponte, varius et mutabilis ;’ ” and this condition of mobility, morbidly exalted, constitutes Hysteria.

REGULAR HYSTERICS.

When called to visit a patient in hysterics, the physician usually finds her sprawling upon her back, violently agitated, a fearful and at the same time a ridiculous spectacle. Her head is thrown backwards, or jerked from side to side; her dishevelled hair hangs about her shoulders; her throat swells as though dilated by some foreign body in its interior, and frequently various choking or gasping sounds are heard. The patient beats her breast with her hands, or tears her hair, or flings her arms about, bringing them not uncommonly into violent contact with the floor or furniture. Sometimes she bites or scratches those in attendance upon her. At one time she writhes her body like a worm, at another she stiffens, and arches her back so as to touch the ground only by her shoulders and hips; again she relaxes the rigid muscles, and resumes her grotesque contortion. Sometimes she flaps her members like a fish which the angler has thrown upon the grass. Sometimes the legs are thrown widely apart, and are rigid and inflexible; sometimes they are tossed hither and thither like the upper extremities. The muscular agitation is

often so violent, that three or four powerful men find it difficult to restrain a slim and delicate girl so as to prevent her from injuring herself or others. Rumbling noises, or sounds like the splashing of water, proceed from the belly, which is usually inflated like a balloon, but sometimes it is drawn in and flattened. In very severe cases spitting of blood may occur.* The breathing is deep and laborious. The heart beats tumultuously. The arteries of the neck vibrate beneath the finger like a musical string. The patient frequently utters piercing shrieks, or makes a low moaning noise. In spite of all this distortion and convulsion, the countenance is generally calm. The muscles of the face enjoy all but perfect immunity from this form of the disease. The eyelids are sometimes closed and tremulous, but sometimes the eyes are open and observant of what passes; and the lips, though incapable of distinct speech, are unpolluted by that viscid foam which dribbles from the mouth of the epileptic. The jaws may be firmly shut or driven together with a clattering noise. During the attack the hysterical patient preserves her consciousness; and when liberated from the grasp of the disease, is able clearly to relate all that transpired.

* Sir B. Brodie—Georget—Messrs. Griffin.

The duration of the paroxysm varies from a few minutes to many hours. On an average it lasts perhaps from half an hour to one or two hours ; but not during the whole period of its continuance is the patient agitated in the way I have described. The great paroxysm seems to be made up of a series of little paroxysms (paroxysmules, Sydenham.) The sufferer is convulsed for a longer or shorter period, when the force of the disease appears partially spent, and a relaxation or period of comparative quiet follows. But very soon the convulsion is renewed with equal energy, which, however, after awhile, is succeeded by a second remission, and so throughout the attack. This terminates ultimately in one of three ways ; and firstly, and infinitely most frequently, in recovery. A profuse flow of limpid urine takes place ; sometimes the patient bursts into a wild fit of laughter, or weeping, or sobbing, and on the subsidence of this she is free for the present from the disease, suffering only from extreme fatigue and the pain of her self-inflicted bruises. This fatigue can of course only be dissipated by prolonged repose. Secondly, the fit may pass into a state of coma, as it is called : that is to say, the convulsion is allayed, but the patient lies for a long period motionless and insensible ; or into a state of simple catochus, when she lies equally

motionless, but retaining a glimmering of consciousness ; or into tetanic catochus, when she lies rigidly extended, motionless, imperfectly conscious ; or into syncope or swoon, when the patient is motionless, unconseious, with more or less complete suspension of the pulse and breathing ; or into cataphora, or unnaturally profound and prolonged sleep ; or into catalepsy, an extraordinary condition hereafter to be described. Thirdly, the fit, when unusually violent and prolonged, produces fatal exhaustion.

M. Rullier* has recorded the case of a girl fifteen years of age, who, in consequence of terror, was attacked with violent hysterics, attended with sudden suppression of the menses. The fit lasted forty-eight hours, and nothing having been done for her relief, she died on the third day. Happily, however, this termination is exceedingly rare. The phenomena just described are those which characterise a fully-formed fit, and these phenomena sometimes appear at once and without warning, but more commonly they are preceded by certain milder symptoms. Thus immediately after the operation of the exciting cause, as fright for example, the patient experiences a general malaise—a peculiar lowness of spirits—a forced

* Dissert. Inaugurale.

and unnatural gaiety—headache—weight in the limbs—an icy or aguish chill—repeated yawning—sighing—palpitation of the heart—sensations of choking—cramps—singular pains in certain regions—voracity, or loathing of food—sensation of a ball rolling in some part of the abdomen, which at length ascends to the throat—and a great variety of other equally anomalous symptoms; some of which occur in one case and some in another, according to the idiosyncrasy of the patient and of the disease. These precursory symptoms vary very much in duration. They are sometimes followed a few minutes after their apparition by general convulsion, while sometimes they occupy the stage for nearly a week, before the fit is developed.

Such is the description of a fit of regular hysterics; which, however, often varies from the above type, when it constitutes what may be termed irregular hysterics.

APOPLEXY OR COMA.

Thus it may come in the shape of apoplexy. In this case the patient falls, to all appearance, insensible and motionless as a log of wood. The breathing is slow, laborious, and accompanied by

a kind of snore, which however proceeds, not from the nose, but from the throat, and the pulse is quicker than natural. The eyes, if open, are, it would seem, sightless. During this state, or on recovery, an evanescent paralysis or feebleness of one side is apt to occur.

EPILEPSY.

A fit of hysterics will sometimes closely resemble epilepsy. In this case contortion of one cheek, one eyeball, or one side of the mouth may appear. The face will turn blue or violet; the veins of the neck swell, and a frothy fluid collect round the lips in addition to the phenomena elsewhere enumerated. Sometimes the eyelids are closed, and if the physician draw them open, he will observe the eyeball rolled so far up that only the white of the eye is visible; but in a few minutes, perhaps, it will be rolled as far downward. But even in this condition, if the patient be sharply pinched in some sensitive part, she will sometimes evidence, by a violent start, unimpaired sensibility; while the true epileptic, on the contrary, is insensible to pain: but this point of distinction will not always hold.

TETANUS.

Sometimes we encounter what we call tetanic hysteria. In these cases the hysterical paroxysm closely resembles an attack of tetanus. I remember one remarkable case. A lady, E. T., aged 37, married, and the mother of three children, had from youth suffered from a variety of anomalous affections. Her circulation was exceedingly languid, and her pulse slow. Her hands and feet were always cold, and her nose blue. For several years before the appearance of the tetanoid symptoms, she had been afflicted with constant vomiting. This disappeared under treatment, and the following complaint arose. Sometimes after some little excitement, but sometimes without any assignable cause, she would begin to turn cold, and experience sensations as of water trickling down the back, or coursing in several minute streams down her face, particularly in the track of the facial artery. Then she would be suddenly seized with a shudder, and lapse at once into universal rigidity. Some conception may be formed of her state by observing what occurs when you plunge a frog into warm water. Her body was quite inflexible, her toes and thumbs were

bent forcibly in, and the surface of her person deathly cold. A horrid spasm affected her countenance. Imagine the small gray eyes, overarched by thin light eyebrows, the wasted livid cheeks, and thin blue lips contracted by the spasm, and displaying a double row of brilliant false teeth, for the lady had been many years toothless. Contemplate this picture, and a faint idea may be obtained of the truly sardonic expression of the distorted countenance. All this time the patient retained her consciousness, although as utterly unable to move or speak as the mummy Cheops. This frightful state would not unfrequently last from one to two hours, at the expiration of which time the vital heat would gradually return and dissolve the spell. With reference to the coldness of surface above mentioned, I may quote Sydenham's remark. "It is worthy of observation, that not uncommonly a notable refrigeration of the exterior of the body paves the way, as it were, for all these symptoms, and for the most part is only dispelled by the termination of the paroxysm; which refrigeration I have found more than once to rival that of a corpse, the pulse, however, remaining undisturbed."

CATALEPSY.

Fermossi in atto ch'auria fatto incerto
 Chiunque avesse visto sua figura
 S'ella era donna sensitiva e vera,
 O sasso colorito in tal maniera.

Orlando Furioso, Canto viii, St. 38.

One of the best authenticated and most complete cases of this variety of hysteria is that related by Dr. Robert Gooch. "Mrs. —— is twenty-nine years of age; *she has long been unusually subject to the common forms of hysteria*; I have seen her, after being strongly excited in conversation, sink down insensible, and a few minutes after recover with choking and sobbing. Her husband tells me that he has often seen her, whilst sitting at the dinner-table, become apparently insensible, with her eyes open, still sitting up, continue in this state several minutes, and then come to herself again, but totally unconscious of what had taken place in the interval. She married nine years ago, has been pregnant many times, but has only borne one living child; every other time she has either miscarried during the early months, or, what was more common, the child has died without any obvious cause, about the sixth or seventh month, and premature labour has come on a week

or two afterwards. A few days after her last delivery of a dead child, at the seventh month (a circumstance which was attributed to some domestic agitation), she was seized with a violent head- and face-ache, which was confined to the left side, and which subsided under the use of hemlock, but she continued to suffer flatulence of stomach, had a quick, weak pulse, and was much depressed in spirits. One evening she told her husband that she had never discharged the duties of a wife as she ought to do, and that her death would be a happy release both to him and her; the next morning she made an unsuccessful attempt to cut her throat. I now saw her in consultation with Dr. Sutherland; she was put under the care of a regular attendant, and was at times so violent, that it was necessary to confine her with a waist-coat. A few days after our first visit, we were summoned to observe a remarkable change in her symptoms; the attendants said she was dying, or in a trance; she was lying in bed motionless, and apparently senseless. It had been said that the pupils were dilated and motionless, and some apprehensions of effusion on the brain had been entertained, but on coming to examine them closely, it was found that they readily contracted when the light fell upon them; her eyes were open, but no rising of the chest, no movement of

the nostril, no appearance of respiration could be seen; the only signs of life were her warmth and pulse; the latter was, as we had hitherto observed it, weak, and about 120; her fæces and urine were voided in bed. The trunk of the body was now lifted so as to form rather an obtuse angle with the limbs (a most uncomfortable posture), and there left with nothing to support it; there she continued sitting, while we were asking questions and conversing, so that many minutes must have passed. One arm was now raised, then the other, and where they were left, there they remained; it was now a curious sight to see her, sitting up in bed, her eyes open, staring lifelessly, her arms outstretched, yet without any visible sign of animation; she was very thin and pallid, and looked like a corpse that had been propped up, and had stiffened in this attitude. We now took her out of bed, placed her upright, and endeavoured to rouse her by calling loudly in her ears, but in vain; she stood up, but as inanimate as a statue; the slightest push put her off her balance; no exertion was made to regain it; she would have fallen if I had not caught her. She went into this state three several times: the first time it lasted fourteen hours, the second time twelve hours, and the third time nine hours, with waking intervals of two days after the first fit, and

one day after the second. After this the disease assumed the ordinary form of melancholia, and three months from the time of her delivery she was well enough to resume her domestic duties."

SOMNAMBULISM.

A female, aged 20, suffered for some months from catalepsy. The disease then assumed a new form. After a fit of catalepsy she used to yawn, raise herself up, and speak with more brilliant wit than she was accustomed to show when free from the malady. She seemed to be addressing many persons who surrounded her, accompanying her conversation with gestures and motions of the eyes. She then began to sing and laugh, used to leap from bed, walk through the ward of the hospital, avoiding all obstacles, and returning to her own bed, cover herself with her bedclothes, fall into a fit of catalepsy, and in about fourteen hours awake quite unconscious of what had happened during the paroxysm. While in this sleep-waking state she was altogether destitute of sensibility. Loud sudden noises, or the flame of a candle applied so near the eyes as to burn the lashes, could not rouse her or cause her to wink, or prevent her going on with her discourse. Spirit of

wine was dropped into the eyes and mouth, tobacco and sal-ammoniac put into the nostrils, and needles thrust into the body, without causing the slightest appearance of sensation.*

CATOCHUS.

This patient was an unmarried female, 29 years of age. Having been previously indisposed for a considerable time, she was supposed to have sprained her wrist in lifting a heavy saucepan. From this time she was never free from pain in the situation of the outer part of the lower extremity of the radius (bone of the forearm on the thumb-side). The pain extended up the forearm, and downwards on the side. In November, 1814, about a month after the occurrence of the accident, she was admitted into the hospital. At this time the most careful examination could detect no alteration in the appearance of the limb, but she complained of a constant and intense pain, which extended from the supposed seat of the injury downwards to the fingers, upwards to the shoulder, and again downwards to the spine and sternum (breast-bone). She had great oppression

* Sauvages, Nosol. Méthod., tom. i; and Mém. de l'Acad. des Sciences l'an 1742, p. 557.

and difficulty of respiration ; occasional twitches of the muscles of the face, and any sudden motion of the hand aggravated all these symptoms, and then threw her into a state approaching to that of syncope, in which she was *almost unconscious of all that happened, lying with her eyes wide open*, and at last recovering with an hysterical sobbing. Her pulse was feeble, beating 120 times in a minute. Forty ounces of urine were drawn off from the bladder, but without any relief as to the other symptoms. The tongue became black and dry ; the pulse more feeble ; the belly tympanitic ; the alvine evacuations being of a dark colour. Then there was hiccough and vomiting : she became weaker and weaker, and died after the lapse of fourteen days from the time of her admission into the hospital. After death the brain, and the thoracic and abdominal viscera, were very carefully examined, but no morbid appearances were discovered in any one of them, with the exception of the peculiar condition of the bladder, which was described formerly, and two ulcers of the mucous membrane of the ileum (small intestine), each not more than half an inch in length, but occupying almost the entire circumference of the intestine.”*

* Sir B. Brodie on Local Nervous Affections.

TETANIC CATOCHUS.

“A case equally remarkable and melancholy, has remained for a very long period under the care of the Finsbury Dispensary. It is that of a young woman, who, for many years past, has been confined to her bed in a state of nearly universal spasm. She lies rigid and motionless, with her eyes more than half closed, and every other organ of sense almost completely shut against external impression. The physician who attended her, by speaking in her ear as loudly as it was possible for him to do, succeeded only so far as to produce a motion of the lips, that betrayed an ineffectual endeavour for utterance. It seems to be a case in which there is an absence of actual sensation, although by some violently exciting cause, the sensibility may at times be imperfectly awakened. Lying in such a state, with scarce any symptom of vitality but a feeble respiration, she can be regarded as little more than a breathing corpse.”*

* Dr. Reid, Monthly Mag. Med. Report, June, 1800.

SWOONING OR SYNCOPE.

“Cleopatra catching but the least noise of this, dies instantly ; I have seen her die twenty times upon far poorer moment :—she hath such a celerity in dying.”—*Antony and Cleopatra*.

One very common manifestation of hysteria is fainting or swooning; and in certain mobile constitutions, these fainting fits recur so frequently, and endure so long, as to be a source of serious alarm. An hysterical girl receives a sudden surprise, no matter whether pleasing or painful, and instantly she experiences a sensation of sickness, turns white in the face—“E cade come corpo morto cade,”—motionless, and insensible. During the continuance of this state, respiration is suspended, and no pulse can be felt at the wrist. Instances are on record in which this death-like torpor continued so long, that the persons in swoon were supposed to be dead. One of these persons, a domestic in a noble family of Spain, was actually submitted to the knife of Vesalius, and only awoke as this anatomist was making the second incision in her body. The story is thus related by Ambroise Paré, the inventor of the ligature : “Ainsy que de ce siècle est arrivé à un grand anathomiste, je dy grand et célèbre, duquel ses livres reparent

aujourd'hui les estudes des hommes doctes, lequel estant pour lors resident en Espagne fut mandé pour ouvrir une femme de maison qu'on estimoit estre morte par une suffocation de matrice : le deuxiesme coup de rasoir qui luy donna commença à se mouvoir et démontrer par autres signes qu'elle vivoit encore, dont tous les assistans furent grandement estonnés : je laisse à penser au lecteur comme ce bon seigneur faisant ceste œuvre fut en perplexité, et comme on cria *tolle* (sic) après luy, tellement que tout ce qu'il peut faire, fut de s'absenter du païs, car ceux qui le devoient excuser, s'estoient eux qui luy couroient sus, et estant exilé, tost après mourut de déplaisir, qui n'a esté sans une grande perte pour la république."*

CATAPHORA.

The patient, a young lady of delicate constitution, in her eighteenth year at the time of the attack, fell into a state of deep quiet sleep, awaking at irregular intervals for an hour or two, twice or three times a week. This affection lasted five years. During her waking moments she sighed, ate reluctantly what was offered to her, had occasional egestions, and instantly relapsed into sleep.

* Deux Livres de Chirurgie. Paris, 1573.

Her recovery was sudden, for she seemed to awake as from a night's rest, by a more perfect termination of the paroxysm, not followed by a relapse.*

A middle-aged female servant had a bleeding from the nose, upon the cessation of which she fell into a lethargy, which lasted three days; the second attack lasted six weeks. During the paroxysms she occasionally swallowed food, and had alvine evacuations. She had two subsequent fits, neither of which lasted above a few days. Not long after she hung herself.†

“A lady about 20 years of age, who had usually enjoyed very good health, was one morning found in a state of profound but quiet sleep, from which she could not be awakened, although the preceding evening she had gone to bed apparently quite well. Various means had been tried with a view of exciting her from this state, but in vain. Under these circumstances I recommended cupping in the neck; and when she had lost a few ounces of blood in this way, she opened her eyes, perfectly recovered, and remained through the day quite free from all symptoms of disorder. The next morning, and for several successive mornings, she was found in

* Dr. Good, Nosology.

† Mr. Brewster. Edin. Phil. Trans. 1817.

a similar state, from which she was recovered by the same remedy, no stimulating external applications producing any good effect. As she was considerably weakened by repeated depletions, it was determined that on the next occurrence of the paroxysm, the case should be left to the effects of Nature as long as was consistent with safety. The experiment was tried; and at the end of about thirty hours she spontaneously awoke, apparently refreshed, and wholly unconscious of her protracted sleep. On the future returns of these paroxysms, which were frequent, the same plan was adopted, and she awoke after intervals of thirty-six, forty-eight, and on one occasion, sixty-three hours, without seeming to have suffered from want of food or otherwise.

“In the early part of the disease, various means were employed without the smallest advantage, except that while under the influence of mercury, which produced a very severe salivation that lasted more than a month, she was free from the complaint. For a considerable length of time these paroxysms recurred, but at length they gradually left her, and soon after she became deranged in mind, in which state I believe she still remains.”*

The reader, I presume, will not quarrel with

* Dr. Cooke, Treatise on Nervous Diseases, vol. i, p. 372.

me, if I subjoin an extract from the *Sleeping Beauty* of Tennyson. He will then perceive in what light a poetie vision regards this affection :

“ Year after year unto her feet,
 She lying on her couch alone,
 Across the purpled coverlet
 The maiden’s jet-black hair has grown,
 On either side her tranéed form,
 Forth-streaming from a braid of pearl;
 The slumb’rous light is rich and warm,
 And moves not on the rounded curl.
 The silk star-broidered coverlid
 Unto her limbs itself doth mould
 Languidly ever; and amid
 Her full black tresses downward rolled,
 Glows forth each softly shadowed arm,
 With braeelets of the diamond bright;
 Her constant beauty doth inform
 Stillness with love, and day with light—
 She sleeps; her breathiugs are not heard
 In palace chambers far apart.
 The fragrant tresses are not stirr’d,
 That lie upon her charméed heart.
 She sleeps; on either hand upswells
 The gold-fringed pillow lightly press’d;
 She sleeps, nor dreams, but ever dwells,
 A perfect form in perfect rest.”

HIERONOSOS.

A lady, 42 years of age, who had always a “very weak system of nerves,” and was rendered speechless for an hour or two upon any sudden

surprise, was affected in November by a fresh paroxysm, which is thus depicted: "She complains of a violent pain in the right side of her face, and of universal erratic aches and soreness. There is a scorching heat all over the skin, except from the feet up to the ankles, which are as cold as marble. Pulse not quickened but full; mouth dry, but no great thirst; body costive, which is indeed her natural habit, so as to oblige her to the frequent use of magnesia. She is regular as to the menses, the return of which she expects in five or six days. Appetite good, rather voracious; but her spirits always low after a full meal, especially dinner. Has a violent pain in the loins, which often shifts from hip to hip: the leg of the aching side being so much affected with stupor and numbness, that she drags it after her in walking. She falters in her speech at times, but this does not continue long. All the muscles of the body evince convulsive motions, not simultaneously but successively; thus her face is first violently affected, then her nose, eyelids, and the whole head, which is thrown forcibly backward, and often twitched from one side to the other with exquisite pain. From this quarter the convulsive action removes, first into one arm and then into the other; after which, both legs immediately become convulsed with violent and incessant

motions, and in this manner all the external parts of her body are affected by turns. She is all the time perfectly sensible, and knows what limb is going to be attacked next by a sensation of something running into it from the part already convulsed, which she cannot describe in words: but the foretoken has always been found to be true, though the transition is surprisingly quick. She is easiest in a prone posture. Such has been her situation upwards of forty-eight hours, with scarce a moment's remission, by which she complains of great and universal soreness. No words can convey an adequate idea of her odd appearance; and I do not in the least wonder, that, in the times of ignorance and superstition, such diseases were ascribed to supernatural causes and the agency of demons.”*

TARANTULISM.

“A few hours after being bitten by the poisonous spider called tarantula, the patient fell down senseless and motionless, with difficult respiration and heavy sighing. As these symptoms subsided, she appeared desponding and melan-

* Dr. White—Edin. Med. Comment., vol. iv, p. 326.

choly, frequented churchyards and solitary places, evinced a capricious fancy for particular colours, and sometimes appeared to have an irresistible propensity to roll herself in the dirt. At the sound of suitable music she began to move first the fingers, then the hands, feet, and successively other parts of the body; and then sighing and dancing, threw herself into every variety of violent and fantastic gesture. Sauvages says, "Those who are stung die in a little time, without the present assistance of music, all other remedies giving no relief." Those affected were capricious as to tune, and required the notes to be run over with the greatest quickness. This quickness of sound, called tarantella, afforded a test for the detection of those who feigned the disease, a practice, according to Baglivi, common among the women of Apulia, when they wished to be indulged in music and dancing. If they were satisfied with slow musical movements, the deception was at once discovered."*

AMERICAN SPIDER.

A girl, 15 years of age, and in good health, was picking some straws from the ground, when

* Dr. Th. Thompson, Chorca—Lib. Pract. Med.

a large black spider ran on the back part of her hand, and without her attempting to molest it, having heard, as she said, that it was good luck, soon ran off. The same afternoon she had involuntary twitches in the arm and side. She then experienced pain in the stomach, and vomited. On the third day she was attacked with nondescript fits, accompanied by exalted sensibility. While under the influence of these, she used to make movements with her hands and fingers, as though after a tune. When music was introduced, her motions corresponded, beating with her hands and fingers' ends upon her breast, as if dancing; and sometimes when, from the violence of the spasm, she could not regulate her motions, and would strike too hard, it was common for some of her attendants to place their hand to receive the blows. She appeared best pleased when her father's hand was placed for this purpose; and if another person ever so gently endeavoured to substitute his own, she would immediately push away the strange hand and seek her father's. This she did, though to everything else insensible, and with her eyes closed; and, as it appeared, by the simple touch of her fingers' ends. All this time her limbs were constantly agitated. When the music began, the muscular agitation became fainter and fainter, and was at last quite subdued;

but the fingers, which stood out from one another rigid and inflexible like the spokes of a wheel, immediately commenced their measured drumming. She exhibited also surprising acuteness of the senses of touch and smell, and a peculiar affection of vision, which led her to take great delight, manifested by convulsive laughter, in the colours green and red. The sight of anything transparent, and water poured slowly from one vessel to another, had the same effect. She would turn away her head from white or black, and their compounds, with aversion and seeming horror. She had now an aversion to her relations, and the touch of one of them used to throw her into violent convulsions. Nine months after the transit of the spider, the spot where it occurred became red, and a gangrenous eschar formed. After it sloughed off her fits recurred less violently, but her hearing was so acute, that she could hear persons whisper in the next room. The sore on her hand began to discharge thick green matter in large quantities, and the fits ceased for five months.*

* Med. and Phys. Journ., vol. xx, p. 224.

ARIA MAGICA.

An extraordinary affection, which I venture to designate by the above name, is recorded by Mr. Kinder Wood. His patient was a married woman, 22 years of age, who had continued to suckle her child fourteen months, the menses having appeared during the latter three months. Her original susceptibility was therefore aggravated into exquisite mobility. The complaint began with a severe faceache, which was relieved by a liniment of opium and ammonia. Then commenced a series of the most wonderful movements, which, after awhile, were ascertained to be executed in musical time. It seemed that a certain air haunted her brain, and compelled her in some way or other to beat time to it. First her eyelids began to move, and twinkle with wonderful rapidity. This affection was generally followed by headache of short duration, sickness and vomiting. Next she kept slapping her hands upon her thighs, and beating a rapid tattoo with her feet upon the floor. Anon the musical demon whisked her from her chair, and sent her dancing round the room on one leg, and carrying the quiescent member in her hand. Or she would partly rise from her chair,

and instantly sit down again, and these movements were repeated with great celerity, or she would shift her seat from side to side in the same manner. Sometimes she was impelled to spring up, and leap as high as she was able. It seemed to be an especial object with her to reach and touch the ceiling. Again, she would pace the apartment, measuring her steps by a series of blows, always in musical time, struck upon the furniture, and her lips were seen to move, but no articulate sound escaped. At last a person recognised the tune (the Protestant Boys) which so exercised her imagination, and began to sing it. The patient immediately danced up to him, and continued dancing till she was out of breath. Then the same air was played upon a fife and drum, and she danced up to the drum as closely as possible till she missed the step, when the motions instantly ceased. They ceased also when the measure was changed, or increased in rapidity beyond her power to keep up with it. A continued roll of the drum had the same effect. Here, then, the remedy was apparent, and it was always resorted to on the supervention of these strange contortions. The bowels were in an unnatural state during the complaint, and the menses appeared on the evening of the day on which it ceased, and an eruption came out near the elbow,

and continued three days. However, after five weeks, the eruption broke out again, and the malady returned and lasted ten days. After a second five weeks the disease recurred a third time. But during this attack the musical mania did not predominate, and music consequently effected no good. When laid down the patient involuntarily turned on her back, and the head was drawn backwards by spasm of the muscles of the neck so violently, as to occasion considerable difficulty of breathing. Her intellect was perfectly sound, and she evinced great and unfeigned desire to get rid of the complaint.*

TIC TIC OR HI CUM.

Two young ladies of very nervous temperament, active minds, excitable temper, and twins, had for some years and exactly the same length of time, been the subject of fits of hysteria, accompanied with a choking sensation and convulsions. In these fits they were continually affected with a motion of the head and arms, regularly occurring in accurate time, and accompanied by the words "tic tie" like a clock. They were sometimes

* Med.-Chir. Trans., vol. vii.

insensible, sometimes sensible, and would say, "I cannot help it; but there is the tic coming," and then they would make a sound like that of a clock "tic tic." Occasionally they would utter distinct words "I cum—I cum," or "Hi cum—Hi cum." At last they both fell into a state of imperfect sensibility, their respiration scarcely perceptible. One of them died. The other had extreme sensibility of the surface of the trunk, a symptom very common in hysteria, so that the slightest touch with the end of the finger gave her exquisite pain, caused her to groan and nearly shriek, and say "hi cum" two or three times; and then the head began to move from side to side, as in some of those grotesque figures which ornament the ancient Dutch clocks, and her hands and arms to turn as they do when a person is driving a gimlet. These quaint motions were regulated by the monotonous tic tic, the last tic being sounded some notes lower than the former. In addition to these symptoms, she experienced at one time difficulty of swallowing, at another heat and throbbing of the temples. Sometimes she was so far conscious as to be able to write, open her mouth for food, which she ate ravenously, but she soon relapsed into insensibility. The examination of the deceased sister revealed nothing but a remarkable state of bloodless-

ness of the various organs, particularly the brain *

GYRATION—ANTIPODISM.

A girl, aged 10, had headache accompanied by vomiting, and increased by the slightest deviation of the body from the erect posture, either backwards or forwards, or to one side. These symptoms lasted about a month; and during that time she lost the power of speech and of walking; at the end of that period she was seized with a propensity to spin round on her feet like a top, with great velocity, always in one direction, and was pleased when those about her assisted in increasing the rapidity of her movements. After continuing nearly a month, these motions ceased, the headache returned, and she became unable to move her neck or support her head. Soon after this she was possessed with a new vagary; she would plant herself across the bed, and turning over and over on her side, roll rapidly from one end of it to the other. These fits at first lasted only two hours, but they gradually extended to six or seven hours every day. When carried into the

* Dr. Elliotson—Clin. Lect., Lond. Med. Gaz., vol. vii, p. 278.

garden, she rolled in the same manner down a gravel walk, and when laid in the shallow of a river, although at the risk of drowning herself, she continued the same proceeding. She rotated about sixty times in a minute, but made little use of her arms to assist her. In about five weeks a new fancy arose; she would lie on her back, elevate her body, and draw her head and heels together, and then suddenly relaxing the muscles, fall with considerable force upon the bed. These motions she performed twelve times in a minute, at first, for six hours daily, and at length for fourteen. After a second interval of about five weeks, the pantomime again varied. She now took to standing on her head, with her feet raised perpendicularly in the air. But as soon as she had attained this position, her strength seemed to fail, and she fell forwards as if dead, her knees striking the bed first. After a great variety of unsuccessful treatment, a spontaneous diarrhœa came on, and she recovered. This case is quoted from Dr. Watt.

The reader will remember, in reference to one peculiarity of this case, a character in *Master Humphrey's Clock*. "Arrived at his destination, the first object that presented itself to his view was a pair of very imperfectly-shod feet, elevated in the air with the soles upwards, which remark-

able appearance, was referable to the boy, who being of an eccentric spirit, and having a natural taste for tumbling, was now standing on his head and contemplating the aspect of the river under these uncommon circumstances. . . . Now, said Quilp, stand upon your head again, and I'll cut one of your feet off. The boy made no answer, but directly Quilp had shut himself in, stood on his head before the door, then walked on his hands to the back and stood on his head there, and then to the opposite side, and repeated the performance."

MORBUS MIRANDUS.

A young lady, aged twenty-one, received a slight blow on her chest from her mother. She spit up a little blood at the time, and felt pain for several days. The pain then shifted to the left flank, and was attended with tenderness on pressure, quick pulse, and incessant vomiting. After a while, flitting pain in the head, throbbing of the temples, intolerance of light, appeared. These symptoms were considered to result from the constant straining. The bowels were moved with difficulty.

This state of things lasted many days; when

the disease assumed a new phasc. Several times in a day she would fall into a state of insensibility. She continued thus ten or fifteen minutes, with her hands fast clenched, or shutting and opening them with great rapidity. There was also considerable rigidity of the sinews of the wrist. These, on the recession of the fit, gradually relaxed, the fingers opened, she fetched a long deep sigh, and recovered.

At the end of three weeks the severe symptoms declined without any obvious cause, and after resisting every kind of treatment; she was sufficiently recovered to go to a party and join in the amusements.

The disease, however, returned; but now the principal symptoms were pain in the chest and left flank, attended with a loud, dry, convulsive, barking cough, and this cough harassed her night and day, *sans intermission*. Almost literally she never left off coughing. The muscles of the chest consequently became so sore that she could not endure the lightest touch upon them. And the anterior part of the right lobe of the liver became painful and swollen, forming externally a round, circumscribed, shining, and painful tumour, which bore all the appearance of an abscess. The torture of coughing was now inexpressible. It was determined to try a course of mercury; salivation was

induced, the cough was relieved, and in a week or two disappeared altogether.

The young lady however, remained very weak, with pain in the head, and intolerance of light; and as the salivation ceased, the cough returned with terrific violence, and her sufferings were, if possible, more intense than ever. Her case was now considered hopeless. The eternal cough, with fits of insensibility, alternating with the old pains in the flank, pain over the bladder, with retention of urine, and suppression for three or four days, spasmodic pain in the stomach, and constant vomiting, had destroyed her rest and appetite, and worn her away to a mere skeleton. Her pulse was rapid, and her voice feeble.

During two or three years, however, the sufferer supported a miserable existence. The disease successively assumed the appearance of derangement of the heart, lungs, and organs of the belly. She lived almost entirely upon milk, and of this not more than half a pint was taken in the course of the day. She took a little ripe fruit, a cherry, or strawberry in the summer, and jelly in the winter.

At times when her body was jarred by violent cough, or any other motion, she felt as though the joints of the spinal column were sore and inflamed, and rubbed upon one another. This

feeling was so excruciating, that whenever she was about to be removed from bed on a sheet, she was accustomed by a violent effort to bring the whole spine into a state of rigidity, so as to preclude the possibility of the slightest motion. An approach to syncope always followed the exertion, in which she lay on the bed for days, unable to speak or swallow, or even stir, yet conscious of everything passing around her. Although seemingly so still and breathless, that it might have been imagined that she lay in a state of perfect relaxation and exhaustion, yet if a hand were laid on hers, it was found in rigid spasmodic action, and instead of reposing quietly on the chest, as it appeared, it was pressed strongly against it, as one does to prevent the elevation of the ribs in painful breathing. The breathing too, although apparently easy and almost imperceptible, was found on close observation difficult and choking. There was a subdued working of the muscles of the throat, and inspiration was either wholly suspended at times, or occurred in short indistinguishable catches, until a deep sigh brought with it general relaxation and relief. It was usually a full week before she recovered from the effects produced by removing her from bed.

But even turning her head on the pillow for a few minutes brought on such convulsive coughing,

and subsequent sinking, that she could not utter an audible whisper, and would lie for hours in a state of the most extreme exhaustion.

Towards the close of February, 1829, while drinking in the evening, she felt as though a cord in her chest suddenly snapped. She was instantly attacked with oppression, burning and pain in the throat and chest, croupy breathing, total loss of speech, blindness of the left eye (not perfect, however), deafness of the left ear (not perfect), numbness and paralysis of the arm. Together with these symptoms there was excessive irritability, tenderness and tumidity of stomach, violent cramp at intervals extending down to the limbs and knees. No more than half an ounce of urine was passed in twenty-four hours, and that thick and black.

These singular phenomena gradually disappeared, and in July a very decided improvement had taken place. It is to be noticed that the fits of insensibility, above described, differed in the earlier and later stages of the complaint. At first they had resembled slight tetanic shocks, during which there was a degree of consciousness of all that was passing around her; at a later period the fits were preceded by a rushing of blood to the head, and she lay staring with a wild glassy look on the bystanders, but without power of speech or

motion ; but towards the present time they came on like cataleptic trances, and fixed her in whatever position she chanced to lie for twenty minutes or longer. "In a late visit to this lady," says Dr. Griffin (about the year 1834, I presume, as that is the date which the title-page of his book bears), "it was gratifying to observe her amendment. She now speaks perfectly well, is cheerful, and entertains hopes of recovery." For convenience of reference to this remarkable case, and as it presents a group of symptoms, which can scarcely be included under any recognised symbol, I propose to term them for the present *morbus mirandus*.*

MINOR FIT.

In the above-described class of cases what may be called the major fit prevails ; but there is a second equally numerous, in which only the minor fit is observed. Upon some slight occasion, the mobile or hysteric female bursts into a fit of passionate weeping, which not the tenderest sympathy can assuage, or she is convulsed with uncontrollable laughter, or lashed into insane fury, or

* Messrs. Griffin, *Functional Affections of the Spinal Cord*.

plunged into an abyss of despair. I knew a lady who had conceived a foolish fondness for a youth accustomed to visit at her house. On one occasion her husband invited him to ride out. The lady instantly imagined that her husband, actuated by jealousy, wished to inflict some injury upon her favourite, and expressed in strong terms her desire, and at last her command to the youth to stay at home. The remonstrance was ineffectual, but those who witnessed the scene can never forget the look and words of the baffled woman, as the gentlemen trotted from the door. Her face was white as ashes, her lips quivered, her left hand tightly pressed her heart to quell its agitation, and at first she was totally deprived of the power of speech. But after a short time, recovering her voice, she poured forth a torrent of imprecations, frightful even to a hardened ear. This was a lady by birth, fortune, and education.

The laughing convulsion may, singularly enough, recur at stated intervals, as ague does. A case is recorded where it happened once a day.* The convulsion may assume the shape of vehement, prolonged, irrepressible yawning. Sauvages informs us, that this is sometimes so intense as to dislocate the jaws, and Höehstetter and Riedlin relate histories of periodie (daily) yawning in girls.

* Gaz. de Santé, No. xviii.

Another hysterie cceentricity and variation of the minor fit consists in the utterance of a succession of ludicrous sounds, which resemble the barking of a dog, the bellowing of an ox, the neighing of a horse, the crowing of a cock, or other brutish noises. Dante seems to have understood this fact, saying

“E quando la fortuna volse in basso
L’altezza de’ Troian, che tutto ardiva
Si che insieme col regno il Re fu casso;
Ecuba trista, misera, e cattiva,
Poscia che vide Polisena morta,
E del suo Polidoro, in su la riva
Del mar, si fu la dolorosa accorta,
Forsennata latrò sì come cane;
Tanto dolor le fe’ la mente torta.”

The ancient Greek physicians wrote long and learnedly upon a disease which they called lycanthropia, the “man-wolf disease,”—a disease which the gods inflicted upon those who derided their majesty or defied their power. The culprit retained his human form, but deprived of the divine gift of speech, and driven from intercourse with his kind, he expressed by wolfish howlings on the banks of rivers, and in moonlit forests, his raging grief. This tradition we are now able to expound, for even in the nineteenth century lycanthropia is a familiar affection—even in the nineteenth century the wolf-women utter lugubrious

cries—and society thus expiates its insensate crusade against Nature.

The affection may consist in a violent and persevering hiccough. A young girl had been tormented for six months with an almost incessant hiccough. It ceased, when the action of swallowing was performed, but returned immediately afterwards. It frequently disturbed her sleep. Antispasmodic remedies and the warm bath failed to give relief. M. Dupuytren therefore applied the actual cautery (a red hot iron) to the region of the diaphragm. The hiccough ceased immediately.*

Again; the nose may fall into hysterics, and indicate its distress by sneezing, so long and so loudly, that the performance, ludicrous enough at first, becomes quite painful. Indeed of all the olfactories distributed among the human race, there is none which I would not prefer to the hysterical; and I question whether the cavalier, whose nose was so long that he was obliged to intrust its care to a faithful squire, his own arms not reaching far enough to carry a pocket-handkerchief within its precincts, I question whether this cavalier would exchange noses with some young ladies. Better indeed wear none, than be afflicted with a delusive ornament, which, abandoning its

* Gaz. de Santé, 1817.

gentler duties, sounds every instant a hoarse alarm, which accompanies you in your walks like a trumpeter, announcing your presence, and exciting the stare, the laughter, and the pity of the good citizens—which at the dead of night blowing a blast, like that from the horn of Arthur, wakes with a start your fellow-lodgers, who respond by “Curses, not loud, but deep.”

Sir B. Brodie relates the cases of two young ladies, both dreadful sneezers. “I was consulted concerning a young lady, 18 years of age, under the following circumstances. She was liable to fits of incessant sneezing, attended with a most abundant flow of watery fluid from the nostrils. This sometimes alternated with nervous cough, while at other times she suffered from that sensation in the throat which is usually described under the name of globus hystericus. Not unfrequently she was affected with ordinary paroxysms of hysteria. She had a feeble circulation, and cold hands and feet, and her menstruation was irregular and deficient; in other respects she was in good health. There was no evident disease in the nostrils.”

“A married lady, 37 years of age, was affected with similar fits of sneezing, attended also with a copious watery discharge from the nostrils. These symptoms attacked her once a week, and in each

of these attacks she sneezed not less than one hundred times, the watery fluid dropping from the nostrils so as to wet the pocket-handkerchief completely through. About the same time she began to experience a disagreeable sensation in the face and palate, not amounting to pain, but which she described to be such as might be produced by a worm creeping in her flesh. These latter symptoms gradually became more distressing, while the fits of sneezing became less frequent. At the time of my being consulted, three years after the commencement of the disease, the fits of sneezing did not occur oftener than once in a month; but she complained of an aching pain, with a sense of pulsation in the roof of the mouth, the teeth, and tongue, occurring chiefly during the night, and being then very severe. There were no perceptible marks either of inflammation or of other disease in the parts to which the pain was referred.”*

* Sir B. Brodie, on Local Nervous Affections.

CHAPTER IV.

HYSTERICAL AFFECTIONS.

“ I could not enumerate in a day all the symptoms which complicate hysterical affections—symptoms as strangely varied as the transformations of Proteus or the colours of the chameleou.”—
SYDENHAM.

By hysteria or hysterical affections, as distinguished from hysterics, I designate that class of cases in which convulsion or general immobility do not constitute the leading phenomena. These hysterical affections I shall classify anatomically ; that is to say, I shall first consider those which affect the head, and afterwards those which attack the neck, the chest, the abdomen, the back, and lastly the limbs : but I have to premise a few words upon what is called

GENERAL HYPERÆSTHESIA.

A girl, admitted into Guy's Hospital on account of a swelling of the right shoulder, was examined by Mr. Key. When investigating the condition of the liver, he happened to press the abdomen rather sharply, and was horrified by the scream of

agony elicited from the patient, who almost leaped from the bed. Slight pressure upon *any* part of the body, but especially where bone lies immediately beneath the skin, produced the same exaggerated suffering. This affection evidently consists in a morbidly irritable condition of the sensitive nerves distributed on the surface.

HEADACHE.

There is a peculiar kind of headache called by medical writers *clavus hystericus*—the hysteric nail. The patient declares it to resemble the kind of torture which a nail driven through the skull into the brain would produce. Its usual seat is the very top of the head. The elder authors also gave the name of *ovum hystericum*, or hysteric egg, to a sensation which the patient has of some solid body, as an egg jammed within the head. But these are not the only methods by which hysteria exasperates the cranium. Sometimes the patient exclaims that her head is squeezed in a vice, or struck in measured blows by a weighty hammer. Sometimes her head falls upon her shoulder as an equal bulk of lead would do. Sometimes she shrieks that flames are rushing to her head—that her brains are boiling, or, it may

be, opening out with such vehemence of expansion, that she fears lest, in a short time, the skull be riven and dislocated. Sometimes the pain is confined to a particular spot. Thus the upper margin of the socket of the eye, about the centre, where a nerve (the supra-orbital) issues upon the forehead, is frequently attacked with almost intolerable pain: or the whole forehead may be involved, constituting brow-ache: or the back part of the head may suffer: or the pain may follow more particularly the course of the occipital nerve. Another form of headache is that which affects the whole head generally, and is accompanied by tenderness of the scalp upon pressure. If to these symptoms be conjoined increased heat of the head, and intolerance of light and sound, especially if sympathetic vomiting occur, then we shall have an affection purely hysterical, but bearing a great likeness to one purely organic—to brain fever or inflammation of the brain. And it is to be regretted that not a few cases have occurred where the disease has actually been mistaken, and treated consequently far too energetically.

While upon this subject, it will perhaps be as well to introduce what I have to say upon the headaches of young women, which depend upon other than hysterical causes. And first of that variety which attacks females weakened by long

illnesses, by loss of blood, by excessive discharges, or by chlorosis. Persons of this class are pallid, subject to palpitation, and shortness of breath upon slight exertion, with usually irregular bowels, and a poor appetite. They complain generally of weight in the head, of temporary dizziness, momentary blindness, or loss of consciousness (an incomplete swoon), and occasional noises in the ears. The headache is relieved by lying down and resting the head either upon a low pillow, or none at all.

The second variety, which affects damsels of a stout plethoric build, with a full red complexion, and large pulse, is frequently attended with symptoms analogous to those above described. Thus temporary giddiness, floating specks before the eyes, noises in the ears, are produced equally by deficiency and redundancy of blood. The plethoric headache is sometimes periodical and synchronous with the menstrual effort, especially when the menses are absent or scanty. Sometimes it is periodical, regularly or irregularly, and bears no relation to the menstrual flow. Sometimes it is constant and continued. The headache of too much blood is relieved by the erect position, or by reposing the head, while in the recumbent posture, upon a high pillow. It is thus distinguished from the headache of too little blood, which is assuaged by the entire withdrawal of the pillow.

The third form consists in what is called local congestion, that is to say, there is an increased flow of blood to the head, as in the second form, but the body generally, instead of exhibiting evidence of excess of blood, is frequently deficient in this vital fluid. As in the first form of headache, the countenance of the sufferer (when free from pain) exhibits the pallid countenance and pearly glistening eye, and fluttering pulse, which marks a lack of blood, (this is to be understood generally); as in the second form of headache, the countenance of the sufferer, during the attack, is hot and flushed, the arteries in the neighbourhood of the ears throb, sometimes visibly, and there is evidence of excess of blood in the head. Now the practitioner is apt to treat this headache as he treats the headache of plethora: but this is a mistake, it should be treated as the headache from want of blood.

The following illustrative case is quoted from Messrs. Griffin: A lady, aged 45, was liable to the following seizure. First, her vision became suddenly dim or troubled, or the half of any object she looked at disappeared. If her eyes were fixed on the window, the glass appeared to move like water flowing in sunshine; or if engaged in reading one half of the letters seemed wanting. She then fell sick and was attacked with agonizing brow-ache,

with flushing of the face, throbbing of the temporal arteries, and feverishness. These symptoms lasted from a few hours to two or three days. She had a variety of other extreme hysterical symptoms, and was benefited by anti-hysterical treatment.

“Mr. Barker, of Gardiner’s row,” says Dr. Graves, “gave me the particulars of a very curious case. A lady of rank, living in the vicinity of Dublin, was occasionally attacked by violent determination of blood to the head, and each of these paroxysms was sure to induce before it ended, a violent propensity to suicide, which she very nearly succeeded in gratifying on more than one occasion. This propensity, and the cerebral congestion which caused it, were afterwards removed, or rather prevented, by the timely application of dry-cupping, as soon as the well-known premonitory symptoms of the paroxysm made their appearance.”*

BLINDNESS.

“An unmarried lady of a very nervous and susceptible habit, came to town in great apprehension about her eyes, the sight of one of them being quite gone. I could perceive no defect in the eye itself. I saw her in consultation with Mr. Travers, who took an unfavorable view of the

* R. I. Graves, M.D., Clinical Medicine.

case, and thought the chance of recovery very slender. I had one reason for hoping a better result, in the knowledge of some facts which Mr. Travers was not aware of till I mentioned them to him. I had been acquainted with this lady for some years, and during that period she had several times almost entirely lost, and again recovered the use of her lower extremities. On two occasions she had been affected with aphonia, and unable to speak except in a whisper, for months together; and on a sudden, without any apparent cause, her voice returned. I trusted, therefore, that this suspension of the power of vision might be a similar freak; and so it turned out: a few weeks subsequently, the sight returned, she knew not how; and she afterwards lost it a second time, and a second time regained it.”*

ANOMALOUS CONDITION OF VISION.

The nerve of sight is sometimes affected as in the two cases recorded by Jüngken. These persons were instantly seized with asphyxia, if light were shut out; and awoke in the night in a state of suffocation if their taper was extinguished.†

Dr. Parry says: “A lady whom I once knew,

* Dr. Watson, Practice of Physic.

† Die Lehre von den Augen-Krankheiten.

could not bear to look at anything of a scarlet colour. Another could bear the sight of no light colour whatever; in consequence of which, the papers and wainscot of her rooms were all tinged with a deep blue or green, and the light was modified by green blinds. If also at any time I visited her in white stockings, I was always at my entrance presented with a black silk apron, with which I was requested to cover these offensive garments.”*

AFFECTIONS OF HEARING.

The reader will find on reference to the case related (p. 95) under the name of *Morbus Mirandus*, an instance of partial deafness supervening as a hysterical symptom. Other examples might be adduced, but one is perhaps sufficient.

IMPATIENCE OF SOUND.

Everybody is familiar with the effect produced by slight noises upon a nervous or hysterical person. A carriage rolling along the street, a door noisily closed, a person speaking unexpectedly behind her,

* Cases of Tetanus and Rabies Contagiosa.

cause her to start and tremble violently. "I have seen a patient of this description," says Dr. Parry, repeatedly thrown into violent convulsions by the noise produced by the falling of a pill-box, or even of a black pin upon the floor."

AFFECTIONS OF SMELL.

Some curious stories are extant of a highly exalted condition of the sense of smell, which gave rise to very singular phenomena. Thus M. Marrigues tells us of a lady who lost her voice whenever an odoriferous bouquet was applied to her nose :* and Domenico Panarollo asserts that he saw a woman who, whenever she smelt orange-flower water, fainted, unless it were immediately removed.† Upon this argument is founded the beautiful poem of Freiligrath, "Der Blumen Rache," and thus it would appear that Pope's fanciful expression contains a germ of truth, and that one may all but

"Die of a Rose in aromatic pain."

* Journal de Physique, 1780.

† D. Panarolli Iatrologism. seu Med. Obs. Pentecost. Quinque. Romæ, 1652.

TIC DOULOUREUX, TOOTHACHE, EARACHE, &c.

The face and jaws are frequently visited with a variety of painful affections. In the hysterical tie there is slight swelling or puffiness in the cheek affected, and pain darting over the face. This pain, which is of a fitful character, radiates as from a focus, from one or all of the following spots,—the centre of the eyebrow, a spot in the cheek-bone, immediately below the inner corner of the socket of the eye, and a spot in the lower jaw, on the hither side of its middle line. The anguish it causes is sometimes excruciating. It is often accompanied by a watery and blood-shot condition of the eye implicated. Various forms of earache and toothache appear in the list of hysterical maladies.

SALIVATION.

Many authors enumerate salivation as an occasional accompaniment of hysteria. Thus Sydenham: "Perhaps also that salivation, familiar to hysterical females, when for many weeks together, they expectorate a thin saliva, depends

upon a similar molestation of the blood by the animal spirits." According to Dr. Graves, in these cases it is not true saliva, but a thin mucus secreted by the throat, which is expectorated.

LOCK-JAW.

"A medical practitioner whom I met lately at a patient's house, told me he had just come from another patient, upon whom he had seen a surprising cure performed. A young lady for many days had been affected with lock-jaw. She was unable to open her jaws, and therefore could neither speak nor eat. At last Sir Charles Clarke was called in to see her. He presently comprehended the nature of her ailment, had her placed with her head hanging over a tub by the side of the bed, and proceeded to pour pitchers of water upon her face. Before he had emptied the second, the patient began to scream and complain, giving very audible indications that she could open her mouth."* In a case related by Dr. Phillips,† a cure was effected by injecting oil of turpentine into the rectum.

* Dr. Watson, Practice of Physic.

† Med.-Chir. Trans. v, 6.

SENSATIONS IN THE THROAT. GLOBUS
HYSTERICUS, ETC.

Hysterical patients complain of a vast number of odd sensations in the throat ; most frequently they speak of a rising or ball invading that region, and threatening to choke them. A patient of Dr. T. Addison, "felt as though there were a *bullock* in her throat." A patient of Messrs. Griffin felt as though a hair were drawn across the windpipe ; and a patient of my own told me that during a paroxysm of hysteric asthma, it seemed to her as though a leaf were suspended in the windpipe, which flapped to and fro every time she drew in a breath.

DIFFICULTY OF SWALLOWING.

Cases of this kind are related by Sir B. Brodie, Dr. Bright, Messrs. Griffin, &c. This symptom, due to a nervous contraction of the gullet, is not unfrequently ascribed to stricture or other organic disease of this tube, and is in consequence injudiciously treated. A long flexible pipe is pushed down the throat, for the purpose of mechanically

dilating or expanding the canal. In Dr. Bright's case the introduction of this probang, as it is called, instantly brought on a fit of hysterics. In illustration of this affection, the following case may be quoted: "A beautiful girl, about sixteen years of age, had menstruated regularly for a year. The sudden death of an indulgent father, at the catamenial period, caused an immediate flooding, accompanied with fainting and trembling fits, which seemed to be hysteric, and in a short time went off. She continued pretty well until the next catamenial period, when the fits recurred. At the next period the menses were suppressed, but the fits again came on, and were more frequent and violent, and evidently convulsive. In a short time she was bled, and emetics were administered. A few days after the operation of the latter, she was seized with a difficulty in swallowing, which increased so much, that deglutition became impossible, and any attempt to perform it caused fits of trembling and reciprocal distension of the chest and abdomen, ending in absolute rigidity of the whole body. She swallowed nothing (?) for thirty-four days, when a probang was introduced, after which she was able to swallow with ease any food offered, for about three weeks; but vomited everything except her medicines, cherries, and strawberries. The bowels were constipated, and

enemata were occasionally administered. After one of these she had a very considerable evacuation of blood. After an interval the difficulty of swallowing returned, and she swallowed nothing for fifty-four days (?). During this time she was affected with fits of tetanus more violently than ever, and was insensible during them. An attempt to introduce a probang, or the slightest mental irritation used to cause a paroxysm. After she had fasted three or four weeks, she first lost her sight,—her eyeballs being drawn up with a convulsive motion—and soon after her hearing. She knew her friends, however, by the touch, for when any of them took her by the hand, she would call them by their right names. When she became able to swallow she drank ale or whey, and ate apples or pears, but no bread nor other solid food for several months, during which she was confined to bed. At the end of this time hard swellings appeared behind the ears, and she was then able to sit up and eat any kind of vegetable food, but could not taste flesh nor broth. During these fastings she did not become emaciated ; her bowels were also obstinately constipated. In the second they were not moved for a month. She died suddenly. The gullet only was examined, and found free from marks of disease.”*

* Edin. Med. Essays and Obs., vol. v, quoted by Mr. Laycock.

LOSS OF VOICE, OR APHONIA.

This is no infrequent phenomenon among "mobile" females. It commences suddenly, continues perhaps for many months, and then suddenly ceases somewhat in this manner. The patient under the influence of surprise, or some strong moral impression, utters an involuntary exclamation, and discovers that she is cured. The story related by Herodotus concerning the son of Cræsus, has certainly a physiological, if not historical foundation. It is recorded, that in a great battle, King Cræsus, surrounded by the enemy, was on the point of receiving his death-wound from an infuriate soldier, when his son, who was afflicted with dumbness, terrified by his father's danger, cried out,—“Spare the king!” So many examples of loss of voice occur among the cases which I have related to illustrate other affections, that it is needless to quote any here.

CONSTANT SIPPING.

“On the 1st of last September I was called to see a young lady, who was represented to be in a

state of imminent danger. On entering the room I found her sitting up in bed, surrounded by several female friends, all in the greatest alarm. Her face was pale, and her countenance indicated a good deal of anxiety. She held in her right hand a cup containing water, which she applied to her lips about every five seconds, and sipped an extremely small portion of the water, which she immediately swallowed with a considerable effort of deglutition, although the quantity was so trifling. She said that she should be immediately choked if she discontinued this perpetual sipping ; and she referred to an intolerable uneasiness at the root of her tongue and in her throat, threatening immediate suffocation the moment she ceased to employ herself in swallowing ; and so urgent was the feeling that impelled her to this act, that the moment an attempt was made to take the cup out of her hand, she began to scream with agony, was agitated with convulsions, and to all appearance seemed in the last agony. The scene had lasted for several hours without interruption, and the appearance of the principal actress was rendered still more tragical by a black mass of leeches around her throat, and the blood from their bites trickling down her neck. On examining her more closely, I found that there was no obstruction whatsoever to the passage of air through the

larynx, and that she could make a full inspiration without any wheezing or noise in her chest; there was no swelling or redness observable at the root of the tongue or in the fauces. As the young lady was of an extremely delicate and nervous habit, being very sedentary and subject to frequent attacks of common hysteria, I immediately conjectured that her present symptoms were the result of an hysterical affection; and accordingly I removed the leeches, stopped the bleeding as soon as possible, and gave her draughts consisting of camphor, aromatic spirit of ammonia, and black drop, under the influence of which the nervous irritation soon subsided, and she fell asleep.”*

SPASM OF LARYNX—MOCK LARYNGITIS.

The upper aperture of the windpipe, the larynx, when inflamed, gives rise to engorgement and swelling of the tissues, of which it is composed, and produces consequently a narrowing of the channel by which the air enters and issues. Hence the patient's breathing becomes modified. His respiration is accomplished with great labour and difficulty. Inspiration is abbreviated; expiration prolonged, and accompanied by a loud

* Dr. Graves, Op. cit.

harsh stridulous noise, something between hissing and whistling. This is produced by the diminished calibre of the tube, by which air is emitted. This peculiar sound, then, is the chief symptom which enables the physician to predicate the existence of laryngitis, or inflammation of the larynx, an extremely perilous and frequently rapidly fatal disease. But if this symptom depend upon narrowing of the aperture of the air-tube from swelling of the tube, will it not also result from narrowing of the aperture (which aperture is formed by a ring of small muscles) from other causes? Will it not result from narrowing of the air-aperture by spasm of the muscles which encircle that aperture? And since we have seen, and shall see, that hysteria produces spasm of almost all the muscles in the body, is it not likely that hysteria will play us this trick, and concealing behind the tragic mask of inflammation her familiar features, cheat us into an heroic treatment by the lancet and mercury, &c., only afterwards to jeer at the energy with which we have combated a phantom? In fact, this not very unfrequently takes place. "I remember," says Dr. Watson, "being asked by Sir Charles Bell some years ago to see a young woman in the Middlesex Hospital under his care. She had recently arrived, and was breathing with the stridulous noise peculiar to

inflammation of the larynx. She had twice before in the country had tracheotomy (puncture of the throat and windpipe) performed for similar attacks; and there were the scars of the operations on her neck: but both Sir Charles and myself were satisfied, upon considering all the circumstances of the case, that the difficult inspirations were spasmodic and hysterical, and she recovered under the remedies which do good in hysteria."

WRY-NECK.

"A lady," says Sir B. Brodie, "became affected with a spasmodic affection of the sternocleidomastoid muscle (that muscle so strongly marked in the neck, and which runs down from behind the ear to the breast-bone), producing what is commonly called a spasmodic wry-neck. This symptom continued unabated for a year, and then suddenly left her; but as the spasm in the muscle ceased, she fell into a state of mental depression, amounting to insanity, and in this she continued during the whole of the second year. At the end of this period she recovered of the disordered condition of her mind, and the spasm of the muscle returned, continuing from that period up to the time of my being consulted."

PAINS IN THE CHEST.

Pain under the left breast, and more rarely under the right breast, is seldom absent, whether in chlorosis or hysteria. The cause of the pain under the left breast has excited much controversy. Some refer it to the spinal marrow ; others maintain its connexion with the heart, the spleen, or the stomach. Dr. T. Addison supports his opinion, that the pain is referable to the stomach, by the following case :—" A young woman in whom it had prevailed for a considerable period, and in a very aggravated degree, died suddenly in a fit, and I examined the colon (large intestine), spleen, heart, and stomach, with the minutest attention, when the only indication of irritation which I could detect was a ring of very delicate vessels, or rather a blush of redness surrounding the cardiac orifice (or gullet entrance) of the stomach, such as might be supposed to be the result of any continued irritation or spasmodic action." This pain (which I propose to call thoracic pain alpha, or alpha pectoris, when it occurs under the right breast, and thoracic pain beta, or beta pectoris, when it is perceived beneath the left breast)—this pain usually affects a small circumscribed spot,

and is not generally increased by taking a deep breath, nor by coughing. It is unaffected by repletion or emptiness of the stomach. It sometimes continues for weeks, or even months, without intermission; but it not unfrequently also intermits, and the patient is free from pain for minutes, days, or weeks. Sometimes it merely remits or subsides into a feeling of uneasiness or bruised sensation without absolute pain. It is often attended with palpitation. Local circumscribed pains, similar to that above described, attack other parts of the chest. Thus a lady whom I attended complained of a painful spot no larger than might be covered by half-a-crown, immediately beneath the right shoulder-blade. In the same way the breast-bone is sometimes the seat of limited pain. Very frequently one or more of the bony prominences in the neck behind, or the back, are painful and sensitive. Occasionally these scattered pains are much more severe than usual. The patient then complains of a feeling as though a knife were run into her; and the complaint bears a great resemblance to pleurisy, an inflammation of the chest, in which, as is well known, similar stitches occur. Sometimes these endemic pains are replaced by a general sensation of soreness or smarting, such as might follow a severe flogging. An instance of

this will be given under the head hysteric asthma. There is also another variety of disordered sensation, which may be called *zona hysterica*, or the hysteric zone. Patients, suffering from this symptom, complain of a tightness or constriction of the chest. Their sensation is that of a tight girdle or iron ring encircling the uneasy region. Sometimes a particular spot in this zone is more painful than the rest of its length; and then the patient feels as though a knotted cord were tightly fastened round the chest. This feeling may be termed *zona nodosa*. It is by no means infrequent.

HYSTERIC ASTHMA.

The following case lately occurred in my own practice, and appears worthy of notice. A lady, thirty-three or thirty-four years of age, who had borne seven children, continued to suckle her last child, then a twelvemonth old. The room in which she spent most of her time was a mere vortex of draughts, which entered through the crevices of two doors and a window. Scarcely, therefore, had the winter of 1848 marked its advent on the thermometer, when the lady was attacked by a violent tic, affecting the whole of

the left side of the face. After a day or two's suffering, she sent for me; but she had hardly begun to relate her ease, when the tic became much less intense, and before I left her she was free from pain. She remained thus for several weeks, but nervous and weakly, and being incessantly occupied with the cares of a family, was constantly on her feet. At the expiration of this time she sent for me again. When I entered her apartment I discovered her sitting on a sofa, her back supported by pillows, and labouring for breath. She was unable to lie down, for in the recumbent posture her difficulty of breathing was insurmountable. She complained of general and extreme soreness of the throat and chest, which was more intense in two spots, viz. just above the breast-bone, over a space which might be covered by sixpence, and just below the right shoulder-blade, over a space which might be covered by half-a-crown. There was no swelling nor redness about the throat or interior of the mouth indicative of inflammation; and the tongue was remarkably clean and moist, and the pulse remarkably quiet. I carefully sounded the chest, and found that the air entered freely every cranny of the lungs. The patient when interrogated as to her internal sensations, stated that she felt beneath the sore spot above the breast-bone, as

though a leaf were suspended in the air-pipe, which acting like a valve, diverted the air all into the left lung. She suffered also from intense aching pain of the whole head, which, she added, seemed as though it did not belong to her. She was unable to support it erect, but, as soon as the pillows were removed, it dropped like a leaden weight towards one shoulder or the other. When the abdomen was suddenly pressed by the finger, she flinched as though she experienced acute pain. As before remarked, she was excessively nervous, and moved to weeping by an ungentle word. Taken together, these symptoms left no room for doubt. It was a case of hysteric asthma.

AFFECTIONS OF THE HEART.

Perhaps no organ in the body is so completely under the influence of hysteria as the heart; and this is only what we are prepared to expect. We know how emotion accelerates or enfeebles the pulse, and quickens or retards the heart's action; we know too, that hysteria is almost synonymous with emotion; hence we expect manifold derangements of this organ. Let an hysterical female be excited, as by the approach of the physician, and, before the excitement subsides, put your

finger upon her pulse : you can scarcely count it. You notice a rapid succession of beats, which seem to blend with or run into one another, and then a dead pause. You wait, expecting its reappearance, until you almost fear it has stopped for ever, but then the pulse recommences with the same tumultuous hurry, the same strange irregularity, the same sudden stop. This anomalous condition of the pulse very frequently excites suspicion of disease of the heart, and not infrequently remedies are employed which are acknowledged to do harm in the hysterical affection, from an unfounded apprehension of this nature.

In severe cases the hysterical affection greatly resembles that terrible malady angina pectoris, the symptoms of which are as follow : the patient, previously apparently in good health, while walking, or engaged in some other occupation, is transfixed in a moment by a mortal pang in the region of the heart, which, from its terrific vehemence, convinces the sufferer that his death is imminent ; and indeed, unless the spasm quickly relax, this conviction is certainly realized.

Now there is such a thing as hysterical angina, which, in the vast majority of cases, is a comparatively innocuous affection : but even this may cause death. Thus, “ these spasmodic affections,” says Dr. Ferguson, “ may occasionally attack the heart ;

when in a mild form there are various grades of distress, from simple palpitation to severe angina. In a severe form the patient will be suddenly killed, as the following case detailed to the writer by Mr. Green, of St. Thomas's Hospital, proves : 'A young lady who had for some time been hysterical, was attacked by peritonitis (inflammation of the belly), from which she was not relieved by depletants (bleeding, leeching, &c.) ; the pain subsided spontaneously, but soon after cerebral disorder arose ; one day she exclaimed suddenly that flames were rushing to her brain, and fell down dead. On inspection it was found that the cerebellum was pale, the cerebrum and its membranes slightly injected ; the right side of the heart was completely gorged with blood. On the left side, however, not only was the ventricle quite empty, but spasmodically contracted, and this was looked on as the active cause of death. A rope of mucus hung from the os uteri ; the fallopian tubes were dark with black blood ; several graafian vesicles were ready to burst ; the hymen was entire.' ”*

* Dr. Ferguson, art. Disordered Menstruation, Lib. Pract. Med.

AFFECTIONS OF THE BREAST.

A lady who had assiduously nursed a female relative afflicted with cancer of the breast, conceived so great a horror of this malady, that her attention was incessantly directed towards her own breast. The slightest sensation was magnified into importance, and watched with trembling anxiety. At last the organ actually did swell, and became the seat of pain. In her alarm she hurried to a surgeon. It was then found that the breast was slightly turgescient from increased influx of blood, and partly suffused with a faint rosy blush. It was tender to the touch, but the tenderness, which resided principally in the skin, extended to the armpit and down the side of the chest. If the skin were pinched, various startings in different muscles of the body followed. When the patient's attention was drawn from the breast, it might be somewhat roughly handled without producing pain. The distinguished surgeon who examined the case gave a confident opinion that no disease existed. Consoled by this assurance, the patient ceased to watch her sensations so diligently, and after a short time all uneasiness and swelling disappeared.

But sometimes a somewhat different case happens, such a case as may be illustrated by the following from Dr. Good. "It is about two years ago that I was requested by an eminent surgeon of this metropolis in dispensing practice, to examine a young woman, then 18 years of age, who, for more than two years had been subject to a painful disorder of the breast, that seemed to defy all parallel and all mode of treatment. On examining into the nature of the symptoms, I found her complaining of sharp cutting pains, diverging from a fixed point in the breast, and shooting equally down the course of the ribs and of the arm to the elbow. The breast was full formed, soft, and globular, without the slightest degree of inflammation or hardness. When the pain was not present, it would bear pressure without inconvenience, but during the pain the whole breast was acutely sensible. The attack returned at first five or six times in the course of the day, and was short and transient, but as the disease became more fixed, it became also more severe and extensive; for the agonizing fits at length recurred as often as once an hour, and sometimes more frequently; and from being comparatively concentrated, the cutting pains darted both downwards, and in the course of the circumjacent ribs, and upwards to the armpit, whence they afterwards descended to the

elbow, below which I do not know that they proceeded at any time. These fits were at length so frequent and vehement, as to embitter her whole life, and incapacitate her from pursuing any employment, for it frequently happened that if she attempted needlework, her fingers abruptly dropped the needle a few minutes after taking hold of it, from a mixture of pungent pain and tremulous twitching. The twitches or snatches in the shoulder, for it at length reached to this height, were at one time so considerable, as to give the patient an idea, to use her own words, that something was alive there; while, though the cutting pain did not descend below the elbow, a considerable degree of trepidation reached occasionally to her finger-ends. Her general health was in the mean time unaffected; and she was regular in menstruation.”*

Together with this condition of the breast, the patient sometimes complains of singular alternations of heat and cold—a kind of local ague of the organ. The pain is frequently described as resembling an electrical shock, darting through the gland like the pang of the *douloureux*. When the pain is very severe, the stomach sympathises, and vomiting occurs. The suffering is usually increased prior to menstruation, relieved during the period,

* Dr. Good, *Study of Medicine*, art. *Neuralgia Mammæ*.

and much diminished on its cessation. Sometimes only a small portion of one breast is affected, but sometimes the whole organ, or even both are implicated. “ Besides this irritable and painful state of a whole or part of the breast, a tumour is sometimes found distinctly circumscribed, highly sensitive to the touch, acutely painful at intervals, more especially prior to menstruation, very moveable, often not larger than a pea, seldom exceeding the size of a marble: generally only one exists, but in other cases there are several similar swellings. Although they continue for years, they vary but little in size. I have never seen them suppurate; they sometimes spontaneously cease to be painful, and sometimes disappear without any obvious cause. This disease is met with in persons of an irritable and nervous temperament, in whom there is excessive excitability of the system, accompanied with diminished power. The menstrual secretion is generally very deficient; but in some cases I have known it morbidly abundant, and have very seldom seen an example where it was in all respects regular and healthy. The flux alba is also a frequent concomitant of this complaint.”*

† Sir Astley Cooper, on Diseases of the Breast.

ABDOMINAL AFFECTIONS.

In the abdomen the same trieksy spirit hysteria plays a thousand gambols. Stitch and spasm, cramp and ache attend her footsteps. Sometimes her viewless lance transfixes the liver—sometimes the spleen—sometimes the kidney. Now she kneads and twists the bowels, now she falls like lead upon the stomach, or contents herself with inflicting an occasional pinch or twinge. Presently crouching in the urethra, she obstructs the action of the bladder, causing it to dilate inordinately from retention of its fluid contents. At another time she winds her invisible lines round the rectum, and at this moment draws them into a tight knot, rendering the natural evacuations impossible, and inflicting the direst suffering, and again uncoiling her toils, permits the bowel to perform its necessary functions.

VOMITING.

Hysterical vomiting is an affection which recurs so frequently among the cases recorded in this work, that it is scarcely necessary to do more than mention it here. Elizabeth Martin was attacked

with smallpox at the age of 17. She recovered from this disease, but remained in a weak state of health, and subject to the following affections. At different times, sometimes immediately after dinner, and sometimes when flurried by the approach of her medical attendant or others, her head would experience an acutely painful sensation, as though it were squeezed in some giant hand; she would have pain in the pit of the stomach, dry tongue, and quick pulse, and instant vomiting of the contents of the stomach, solid or liquid, as it happened. Her appetite was good, her menstruation regular. She had a few other trifling ailments. She remained thus several years, but ultimately recovered. During the continuance of the disorder, she took, among others, the following remedies, but without deriving benefit:—potash, bismuth, mercury, opium, prussic acid, quinine, strychnine, camphor, fetid gums, acetate of morphia, creasote, emetics. She had also blisters and leeches to the pit of the stomach, and leeches over the heart.*

POLYDIPSIA AND BULIMIA, OR HYSTERIC THIRST
AND HUNGER.

A young woman of a very delicate habit had for a long time suffered from hysterical fits. Much

* Mr. Laycock on Hysteria—Edin. Journ. No. I. v. 49.

medical treatment had been adopted with temporary relief, but the disorder nevertheless frequently recurred. She was therefore ordered change of air and sea-bathing. While at the sea-coast, she was attacked very severely with certain hysterical symptoms, for which she was recommended to apply a large blister over the spine. She complied, but the result was very distressing, as the following extract from a letter written by her sister will show. "The blister rose very well and discharged freely, but the matter that came from it after the second day grew very thick, and did not flow off as it did before ; the sore, too, looked very strangely ; but on applying basilicon instead of the white cerate, its appearance became more natural ; she complained much, however, of pain in the left side, which prevented her from lying on it, and of *insatiable thirst*. Some ale was brought to her, which she drank without stopping. She drank a whole bottle of Clonmel ale in a few minutes, besides wine, which she asked for repeatedly. She rested tolerably well that night. The next day, Thursday, she chose to get up and come down to the drawing-room, where she lay on the sofa. She seemed weak, and complained much of her sides, particularly the left. She ate very heartily, however, and took two glasses of wine before dinner. At dinner she ate

broiled mutton, drank a bottle of ale, and said that nothing but wine and ale could satisfy her. She had an hysterical fit of crying, but soon became calm; and seemed finely that evening, except for the pain in her side, which she said nothing but eating relieved. After tea she went to bed, and about nine o'clock asked for an egg and ale for supper. This she got and asked for another. I thought the blisters discharging so much must have weakened her, and was afraid to refuse. During that night she got seven glasses of wine, and draughts of camphor julep! At length I positively refused her any more, and entreated her to be still and calm; for she was frightfully impatient, talking incessantly, and begging for wine and ether. She had no oppression, but had the palpitations that night and very much the following day. Her stomach at last grew very sick, and she discharged it, throwing off much bile: she seemed better afterwards, and grew a little composed. Next day I fed her thirst with slops and broths. She was exceedingly ravenous. She is now much better." This young lady had ordinarily a very slight appetite, and was never accustomed to more than the smallest quantity of ale or wine.*

* Messrs. Griffin, Observations on Functional Affections of Spinal Cord, p. 53-4.

PAINFUL AFFECTIONS OF THE BELLY A. B. Γ. Δ.—

SPASMS. COLIC. PAIN OF KIDNEY, URETER,
BLADDER. PAIN OF WHOLE BELLY.

The abdomen is visited by a great variety of aches and pains, of which only the more important can be here enumerated. The first of these, seated close to the margin of the ribs on the right side, which I shall call *alpha abdominis*, has been so accurately described by Dr. T. Addison, that I shall transcribe his account. “This pain,” he remarks, “although occasionally circumscribed almost to a point, usually extends from the pit of the stomach along the margin of the ribs, nearly to the loin of the side affected; it is neither considerably nor uniformly increased by a full inspiration, yet this is occasionally observed. External pressure, however, aggravates the pain, and sometimes in a very remarkable degree, whilst in some instances there is such tenderness, that the patient shrinks from the slightest touch. The pain now and then shoots through to the back, or between the shoulder-blades, but very rarely to the top of the right shoulder. This pain will occasionally remain, with slight intermissions, for weeks or even months; at other times it subsides

altogether, and is succeeded like the pain under the left breast, by a sense of fulness or tension of the part. As to the actual seat of this pain I confess myself incompetent to decide. I have sometimes supposed it to be in the large intestine, as it may now and then be traced from the margin of the ribs almost into the groin; in other instances I have supposed it to be seated in the duodenum (first portion of the small intestines), from its being occasionally attended with sickness, from its being aggravated during the operation of mercurial purgatives (which are supposed peculiarly to affect the duodenum), and from its being in some rare cases attended with a remarkable sallowness or icteric aspect of the countenance, and indeed with almost complete jaundice'' (jaundice being supposed frequently to result from irritation or inflammation of the duodenum). This affection is often mistaken for inflammation of the liver, and injudiciously treated as such.

Pain under the margin of the left ribs similar in character to that under the right ribs is by no means of infrequent occurrence. It may be merely a continuance of that seated under the left breast, *pectus*, or it may occur as an independent affection. I would denominate it *beta abdominis*.

Pain in the left side following the course of the

deseending colon or large intestine (delta abdominis) ; that is to say, affecting the region bounded by the ribs above and groin beneath of the left side, is sometimes coincident with that which resides beneath the left breast, but it also occurs alone. It varies in intensity as in permanence. It is more affected by flatulence than the pains above described, and is generally aggravated when those rumbling or gurgling noises indicative of the motion of wind are heard.

Pain in the region on the right side, corresponding to that just described on the left, and therefore overlying the ascending colon. This affection which sometimes concurs with that described as alpha abdom. but sometimes also exists *per se*, I shall style gamma abdominis. It scarcely differs from delta abdom.

The fifth painful affection, which more or less manifestly, according to the intensity of its attack, implicates the stomach, constitutes what is termed in vulgar parlance "the spasms:" "It will sometimes come on suddenly, occasioning the most excruciating agony; the patient screams from the violence of her sufferings, her countenance is expressive of the greatest distress, and she leans forwards or bends the body, in order to diminish the pressure of the muscles of the belly." The pain, she says, draws her double. "This in some cases

will last with little mitigation for several minutes, or even hours, the patient the whole of the time making loud complaints, and declaring that she must die, if not speedily relieved. This pain will probably remit, and be succeeded by another, much less severe, though more permanent; both the intense and more moderate pain being much increased by pressure over the pit of the stomach." This malady may be denominated hysteric spasm of the stomach.

Sometimes the violence of the disease rises even higher than in the hysteric spasm, and produces an affection similar to that which is variously named iliac passion, ileus, volvulus, &c. It may be called hysteric ileus, and is thus admirably delineated by Sydenham: "Sometimes attacking the colon and region subjacent to the pit of the stomach, it inflicts an almost intolerable pain, not unlike that which marks the iliac passion, when the patient vomits an immoderate quantity of a greenish matter, like that variety of bile which exhibits the colour of a leek, or matters of some other more unusual colour. Sometimes also, after many days' endurance, the patient being all but killed by the said pain, which might vanquish the apathy of the Stoics, and the constant effort of vomiting, the whole surface of the body assumes an intense saffron-yellow colour, and the

paroxysm is terminated. In the mean time, the patient, a prey to the direst mental anguish, loses all hope of recovery, and this peculiar dejection of the mind, or semblance of despair, is (according to my observation) no less characteristic of this variety of hysterical affection than the pain and vomiting above mentioned; and this variety occurs principally in those who are of a relaxed and erude habit of body, as well as in those who, with great expenditure of the natural stamina of life, have brought forth unusually large children."

The kidney and bladder and ureters (or aqueducts which convey into the latter reservoir the secretion of the former organ) are by no means exempt from the caprices of hysteria. "Sometimes," says Sydenham, whose medical descriptions are remarkable, no less for the terse and classical language in which they are couched, than for the fidelity with which they follow the phenomena of disease—"sometimes this malady, invading one or other of the kidneys, and exciting atrocious pain in this organ, simulates a nephritic paroxysm, and that not only in the kind of pain, and locality of its appearance, but also in the violent vomiting by which it is attended, and sometimes in the fact of its extension to the duct of the ureter, so that it is extremely difficult to decide whether these symptoms depend upon the presence of a

stone in the kidney or ureter, or only upon an hysterical affection."

Again he goes on to say, "But neither is the bladder secure from this pseudo-symptom and mimic affection, for not only is it subject to hysterical pain, but also to retention of its contents as though its aperture of egress were blocked up by a stone, which however has no existence. This last affection of the bladder is very rare, but that which attacks the kidneys is much more common." Modern experience, however, is at variance with that recorded by Sydenham. It is nowadays extremely common to meet with cases of hysterical suppression of urine. The patient, without any defect or morbid alteration of parts, is suddenly unable to pass her water, and it is frequently necessary to employ an instrument in order to evacuate the bladder.

Hitherto I have described this subtle malady as attacking this or that spot, this or that organ; but I have now to speak of it as affecting the belly generally. A young woman will sometimes complain of great pain in the abdomen, aggravated by pressure. In certain cases the tenderness is so exquisite, that the weight of the bedclothes becomes intolerable, and even the lightest touch is dreaded by the patient. Together with this, the bowels are inflated with air, and give out a

hollow drum-like sound when gently struck by the finger, and the belly is protuberant, and tense as a fiddle-string. The pain is aggravated by the movement of flatus in the bowels. The bowels, however, are not always distended with air, and this is a point important to be borne in mind. The symptoms just enumerated are the symptoms of peritonitis,—of that terrible inflammation of the belly, which slays many more of its victims than it spares; they are also the symptoms of hysteria—in this instance, as in many others, a mere ass in a lion's skin—only capable of instilling terror in proportion to the skill with which it usurps the lineaments of its original.

The hysterical belly-ache sometimes presents so perfect an imitation of peritonitis, that “it will require all your tact and discernment,” says Dr. T. Addison, addressing his clinical pupils, “and what is more, it will require all your philosophy and forbearance to abstain from copious depletion, under an apprehension that it may be peritonitis.” Elsewhere Dr. Addison states, “I remember a very curious case of this kind, which must be in the recollection of some present. It occurred in the person of a middle-aged woman. I was told she laboured under chronic peritonitis, and, under the influence of high authority, I concluded that it was so. Her belly was as tense as

a drum, exquisitely tender, and presented a most singular appearance, from the thousands of leeches which it appeared had at various times been applied. Shortly after I first saw her, however, I was astonished, on visiting her, to find the walls of the belly quite relaxed, and altogether free from pain. This led me to investigate the case narrowly, and I found my patient suffering from irritable uterus and leucorrhœal discharge. Under the appropriate treatment she was relieved, and discharged."

As a sequel to the foregoing case, Dr. Addison, with that candour which always accompanies distinguished attainments, relates the following. "I have already told you that a case lately occurred in Martha's Ward, which proved so puzzling that I really could not positively determine whether it was peritonitis or mere neuralgia, although, from the history of the patient, a young girl of nineteen, who had fallen into prostitution, and from the state of the uterus, there were strong grounds for suspecting it to be merely neuralgia. However, to err on the right side, the case was treated as one of peritonitis. She was blooded to faintness, had calomel and opium, leeches, and so forth. I soon was convinced, however, that I had been wrong. The pain became extremely unsteady, now affecting the ascending, now the descending

colon, and then attacking more or less of the abdomen generally, with intervals of perfect ease. She had a very protracted convalescence, which I ascribed to the severe practice into which my mistake had betrayed me. I need only remark further, that I have known patients literally blanched by repeated bleeding and cupping, to remove the neuralgic pains described; and on the other hand, I have known them, after months or years of such injurious practice, speedily relieved, and enabled to enjoy the ordinary comforts of life, by a treatment founded on the principles which I have presumed to recommend to your notice."

A striking illustration of this disease is recorded by Dr. Griffin. Mrs. H——, aged 24, was attacked with acute pain and tenderness in the right flank. This was attended with costiveness, thirst, heat of skin, hard quick pulse, and most incessant vomiting. In a few hours the tenderness became so great, that she could scarcely bear the slightest touch, and the irritability of stomach so extreme, that even the smallest quantity of fluid was instantly rejected. Relief was obtained by bloodletting, mild purgatives, and blistering, but the sickness continued in spite of all treatment. After two or three days, the other symptoms returned with great violence, but the pain seemed

to run transversely across the belly, just below the ribs. Relief was again obtained by bleeding, purging, and blistering. A third time, however, the disease broke out with tremendous violence, but the pain occupied the left flank, and a third time the patient was bled, purged, and blistered. In this fashion the disease persisted through several weeks, when, as the evacuations had always been scanty, of a dark colour, and intermixed sometimes with green leafy bile, and as some slight enlargement of the liver was supposed to be detected, a chronic affection of this organ was pronounced to be at the root of all the mischief, and a mercurial course was agreed on. Copious salivation was induced, and this was followed by a slow but progressive amendment, though the lady remained for a long time in an enfeebled emaciated condition, and was for months subject to slight returns of the complaint.*

CONSTIPATION—STRICTURE.

Constipation of the bowels is a frequent concomitant of hysteria; but sometimes it endures so long, and the patient is so completely unable to relieve herself, that the existence of a mechanical

* Messrs. Griffin, Functional Affections of the Spinal Cord.

obstacle, or an actual stricture of the bowel, is suspected, or even asserted with confidence.

Dr. Symonds, in the 'Library of Medicine,' relates the following case: "Our opinion was requested upon the treatment of a young lady, who was considered by her relatives and herself to be afflicted with an incurable stricture of the rectum, and who had been under medical care in another part of the country. She was of a highly excitable temperament; her age was twenty, and she had been ill for more than a twelvemonth. Her malady in the first instance had been treated as if dependent on a chronically inflamed, and then obstinately torpid and congested liver. The remedial measures employed were venesection, cupping over the hypochondrium, leeching, blistering, and mercurial salivation (! !); notwithstanding all which, the young lady became worse rather than better. It was then suspected that some mischief existed in the rectum; and to ascertain this fact, a female, supposed to be experienced in such matters, was directed to make an examination, and, upon her report, the case was pronounced to be organic stricture: the regular use of the bougie was now recommended, but no rectum-bougie could be made to pass the stricture; whereupon some moderate-sized urethra bougies were used, but with great pain and difficulty. These were

shown to us as proofs of the mechanical obstacle ; and we furthermore learned that the young lady often suffered from palpitation, headache, and breathlessness, for which it had been advised that she should be occasionally bled (!), by way of equalizing the circulation, while the liver was to be kept up to its duty by occasional doses of calomel (!). The bowels were opened by enemata. After a careful examination of the case, we stated our inability to discover proofs of anything but aggravated hysteria. We advised the bougies to be laid aside, much to the astonishment and doubt of the relatives, and to the relief of the patient, who had suffered greatly from their introduction ; and we advised the use of tonics, sedatives, laxatives, and a bracing regimen. The patient was gradually improving, with occasional fluctuations (in the course of which we had an opportunity of observing, more than once, that a rectum through which such evacuations could pass, as were submitted to our notice, was quite capacious enough for its ordinary function), when the cure was suddenly taken out of our hands. We called one morning as usual, and instead of finding the young lady stretched upon the couch, afflicted with tremors, palpitations, throbbing pains, and a thousand other ills, we saw her advance to meet us with all the appearance of a person in health.

She informed us that on the previous evening she had had a long and interesting conversation with a gentleman who had recently arrived from the metropolis, where he had witnessed some astonishing effects of miraculous agency in the removal of incurable maladies; and that he had encouraged her to expect a similar display of supernatural power in her own case. She lay awake a great part of the night, meditating upon what she had heard, and in the morning assured her mother that she could leave her bed without help, and that she was quite restored. From that time she was perfectly independent of medical aid till some months after, when the hysteria appeared in a different form."

DIARRHŒA.

"Sometimes attacking the stomach, it (hysteria) excites continual vomiting; sometimes, when it assaults the intestines, it produces *diarrhœa*; but both of these symptoms are unattended with pain, although in both green bile is very frequently excreted: and both are familiar to those whose strength is broken by repeated hysterical paroxysms."*

* Sydenham.

SPINAL TENDERNESS.

A great deal has been said of late years concerning the condition of the spine in hysterical cases. Sydenham indeed, many years ago, remarked, that "among all the tortures of this disease, none is so frequent as pain in the back ; to which even those in other respects but little scathed by the malady are almost invariably exposed. Moreover, this pain, like those in other organs, leaves on its subsidence a peculiar tenderness, such as would follow a vigorous cudgelling ; and this tenderness disappears but gradually." There can be no doubt but that, in the great majority of hysterical complaints, we may, if so inclined, contrive to locate the disease in the spinal marrow to our own satisfaction, if not to that of others. The method of examination at present generally pursued is the following. The examiner stands behind the patient, and, commencing just below the neck, makes firm pressure with his knuckles successively on each projecting ridge, or spinous process as it is called, that stands out from the spinal column. Less usually he tries the effect of scalding the patient by a sponge dipped in hot water. In the course of his investigations it fre-

quently happens, that as soon as he presses or seals one particular ridge or vertebra, he perceives his patient wince or give some evidence of pain. "Aha!" says the physician, "there it is." He then repeats the experiment, and if he finds that the patient only manifests pain, as he runs his knuckles down the spinal column, at one and the same spot, he no longer entertains a doubt but that he has detected the *fons et origo* of the mischief, which in his opinion can be no other than a local circumscribed inflammation or irritation of a corresponding point in the spinal marrow. Sometimes, however, he is baffled, but then, instead of yielding the point, he will sometimes begin to punch or hammer the vertebræ, as he before pressed them. In this way it very rarely happens but that he at last succeeds in finding some sensitive spot, which he can assume to be the seat of the disease. He now feels it a clear duty to apply leeches to the culprit vertebra, or mercurial inunction, or a blister, or an issue or seton, and strictly enjoins perfect quiet and the recumbent position.

Not unfrequently, however, the pain in the back is a much more prominent symptom than I have here described it to be; and attracting the patient's chief attention, and filling her head with the fear that some disease exists in that situation, it

greatly misleads the practitioner. In this case it is not that the medical attendant, occupied by a delusive theory, endeavours to trace certain recognised hysterical or neuralgic symptoms to an hypothetical irritation of the spinal marrow, but his attention is wholly arrested by the pain in the back, which leads him to apprehend inflammation or ulceration of some of the joints of the spinal column, and to fear lest it should degenerate into curvature and its distressing concomitants. Taking this view of the disease, he impresses on his patient the necessity of a rigid maintenance of the horizontal position. Obeying this recommendation, which accords with her own instinct, the unfortunate maiden stretches herself supine upon the bed or the sofa, and vegetates many a weary month in slothful languor. Hence it happens, as might be expected, that those other maladies which usually accompany spinal tenderness take firmer root, and completely overgrow the neglected soil.

SOFA-DISEASE.

When a person has for a long time refrained from exertion, any attempt to resume his wonted exercise is attended with a certain mental and

muscular pain and resistance. He has, in fact, to overcome an accumulated *vis inertiae*, and the energy requisite to success must be thrown upon him from without. Hence, as the result of the protracted confinement alluded to in the preceding paragraph, ensues what I may term the sofa-disease. Of this affection I may quote two examples:—"A lady told me not long ago," says Dr. F. Watson, "that an acquaintance of hers, a member of a family of distinction, had been lying I know not how long on her back, the position having been prescribed to her by some medical man for a presumed disease of the spine. She lost all power of using her legs; but she got quite fat, as, indeed, well she might, for her appetite was remarkably sharp, and she lived chiefly upon chicken; and the number of chickens she devoured was incredible. She lived at some little distance from town, and at last Sir B. Brodie was sent for to see her. Now Sir Benjamin, to use a vulgar phrase, is up to these cases, and he wished to see her try to walk; but she declared, that the attempt to do so would kill her. He was resolute, however, and had her got out of bed; and in a few days' time she was walking about quite well, and very grateful to him for his judgment and decision."*

* Dr. F. Watson, *Practice of Physic*, vol. i, p. 692.

Dr. Bright was requested to see a young lady who had been confined to her bed for nine months. If she attempted to move she was thrown into a paroxysm of agitation and of exasperating agony, affecting more particularly the abdomen. She had almost lost the use of the lower extremities, and she and her friends seemed to have given up all hope of her restoration. But she presented no appearance of important disease; her countenance bore no mark of internal mischief, nor was it possible to discover any proof of organic change. Dr. Bright set the case down in his own mind as one of hysteria. She was thought to have derived relief from some stimulating injection, and from certain pills. As her friends were in moderate circumstances, Dr. Bright talked seriously to the mother, and recommended that bread pills should be substituted for those the girl had been taking, and that simple water should be employed for the injection. The mother soon perceived that these means produced the same tranquillizing effects on her daughter which had hitherto been ascribed to the medicine. "My visits," says Dr. Bright, "became less frequent; I was absent a fortnight: on my renewing my visit, no change had taken place. I attempted to get her shifted gently from the bed to the sofa, but it was impossible; the paroxysm almost overcame

her. Once (after having attended altogether about nine months) I called, after an absence of nearly a month, her sister met me at the street-door with a smiling face, to tell me that our patient was quite well; and, on inquiry, she related how, three mornings before, under a *deep religious impression*, she had completely recovered all her powers; and I found her sitting up, working, and amusing herself, as if she was completely convalescent from an ordinary illness."

DYSMENORRHŒA, OR PAINFUL MENSTRUATION—
IRRITABLE UTERUS.

Dysmenorrhœa, or painful menstruation, is an affection closely allied to the various forms of hysterical suffering elsewhere described. The patient who labours under dysmenorrhœa may not in other respects perform the function irregularly. The flow *need* not exceed nor fall short of the standard quantity; its physical appearances *need* not in any way undergo change. The essence of the disorder is an extraordinary degree of pain, concomitant with the monthly secretion. At this period the patient suffers the direst torture. Her back aches as though it would break, and the loins, inside of the thighs, and lower part of the abdomen are affected with intense pain; and

this pain does not of necessity subside immediately with the cessation of the secretion, but not unfrequently torments the patient for days, or even weeks afterwards. Sometimes it becomes permanent, embittering the whole existence of its victim. When it assumes this form, the permanent pain usually localizes itself more exactly, and particularly affects the uterus. Hence this condition, to which the attention of the profession was first directed by Dr. Gooch, has been named "irritable uterus." It is thus described by this author. "A patient who is suffering from the irritable uterus, complains of pain in the lowest part of the abdomen along the brim of the pelvis, and often also in the loins. The pain is worse when she is up and taking exercise, and less when she is at rest in the horizontal position, although never quite absent. Hence she soon learns to relieve herself by lying on the sofa, and at length spends nearly her whole time there. Notwithstanding this precaution, there is always a considerable degree of uneasiness, but this frequently increases to severe pain. These paroxysms generally come on either a few days before menstruation, or (as is the case in many instances) a few days afterwards. If the paroxysm is properly treated, it subsides in a few days to the ordinary and more moderate uneasiness. The

general health is not of necessity much affected. To embody these symptoms in one view, let the reader fancy to himself a young or middle-aged woman, somewhat reduced in flesh and health, almost living on her sofa for months, or even years, from a constant pain in the uterus, which renders her unable to sit up and take exercise; the uterus, on examination, unchanged in structure, but exquisitely tender; even in the recumbent posture always in pain, but subject to great aggravation more or less frequently." A patient of Dr. Goode thus described an attack of what she called her spasms. "In the lowest part of the abdomen, or a little lower even than that, internally, she felt first a sense of heat, to this was speedily added a sense of throbbing, then a sense of distension, as if there were a tumour within, which gradually expanded till it felt ready to burst, then began the spasms; these she described as shootings or electric shocks, darting from the tumour up into the abdomen; they recurred every five or ten minutes, making her start with such violence as to shake the bed. I have been in the adjoining room when she has been in this state, and have perceived the shock; between the spasms she felt what she called a convulsive pain." This patient was a young lady, 25 years of age, chlorotic, nervous, hysterical, who had long been

subject to dysmenorrhœa. Naturally delicate, her proneness to disease had been increased by much mental distress and anxiety. At the time when her spasms afflicted her she was reduced to a mere skeleton. Her appetite was capricious. Her stomach constantly rejected a portion of the food taken at every meal. She suffered from profuse leucorrhœa. Then she was taken with fits of catochus (described in a former part of this work), followed by temporary delirium and blindness. Ultimately, however, the patient regained a tolerable amount of health and strength. Concerning the causes of the affection Dr. Goode expresses himself thus : “ In one patient it came on after an enormous walk during a menstrual period ; in another, it was occasioned by the patient’s going a-shooting with her husband not many days after an abortion ; in a third, it came on after standing for several hours many successive nights at concerts and parties ; in a fourth, it originated in a journey in a rough carriage over the paved roads of France ; in a fifth, it was attributed either to cold, or an astringent lotion, by which a profuse lochia was suddenly stopped, followed by intense pain in the uterus ; in a sixth, it occurred soon after matrimony. Although, however, the disease followed, and was apparently excited by these several causes of irritation, yet the patients had

previously manifested signs of predisposition to it; they were all sensitive in mind and body, many of them had been previously subject to the ordinary form of painful menstruation. The disease seemed to consist in a state of the uterus similar to that of painful menstruation, only permanent instead of occasional."

NEURALGIA OF THE EXTREMITIES—FINGERS, ARM,
ANKLE, HEEL.

Of the various local affections which visit the extremities, the first to claim our attention is neuralgia—permanent or transient pain or tenderness of any member. A few years ago, while in charge of the surgery, Guy's Hospital, I saw several of these cases, one after the other. I may quote the following as examples:—A girl in humble life, about 18 years of age, came to me complaining of permanent pain in the little finger of the right hand. On examination I found it half bent, red, and slightly, though but slightly, swollen, and very tender when touched. In all other respects the girl appeared healthy. She menstruated regularly. Another young woman, about 23 years of age, and recently married, complained of pain affecting the little and ring fingers,

and one side of the middle finger (that side which was next to the ring finger) of the right hand. There was no redness nor swelling. The pain extended from the little finger along the inside of the arm as far as the armpit, following exactly the course of the ulnar nerve. Pressure on any of these painful parts aggravated her suffering. Her general health was good. In a third case, a patient of Mr. Key exhibited precisely the same symptoms as those last described, but in addition she presented other unequivocal marks of hysteria. Thus when Mr. Key, wishing to examine the state of the liver, happened to press the abdomen rather roughly, she screamed violently, and nearly jumped out of bed. She was about 30 years of age, and of a pallid scrofulous habit.

The ankle is occasionally the seat of a very similar affection, and sometimes the heel suffers in like manner. The patient is unable to walk, for pressure upon the affected spot throws her into an agony of pain.

These nervous pains not unfrequently supervene upon some slight injury, and tend to pass into a completely formed fit of hysterics. In support of this position some striking cases have been recorded by Sir Benjamin Brodie. In one case, a young lady, 11 or 12 years of age, pricked the forefinger of the left hand with the point of a

pair of scissors. This was followed by pain extending up the middle of the fore-arm and inner side of the arm, in the course of the median nerve. The next day the fore-arm was found fixed by muscular spasm at a right angle with the arm. After a few days, convulsive movements of the hand and fore-arm appeared, and for two days the stomach was so irritable, that whatever food was taken was immediately regurgitated. By degrees the convulsion involved the other members, disabling the patient from walking or even standing. Sometimes the diaphragm was affected so as almost to threaten suffocation—sometimes the jaws were immoveably fixed—sometimes universal rigidity and arching of the trunk occurred—sometimes there was violent pain in the head. Ultimately, however, recovery took place.

MUSCULAR TWITCHES.

Accompanying these neuralgic pains, but also frequently independent of any marked pain or uneasiness, we meet occasionally with various odd movements in the muscles. Thus Dr. Darwin speaks of “a young lady, about 11 years old, who, for five days, had a contraction of one muscle in her fore-arm, and another in her arm, which

occurred four or five times every minute; the muscles were seen to leap, but without bending the arm. To counteract this new morbid habit, an issue was placed over the convulsed muscle of her arm, and an adhesive plaster wrapped tight like a bandage over the whole fore-arm, by which the new motions were immediately destroyed, but the means were continued some weeks to prevent a return.”* Dr. Good also observes, that he has seen this muscular spasm sometimes about the shoulder, but that the extremities are its most usual seat. “I was lately consulted,” he states, “by a lady of a strikingly irritable habit, who was suddenly attacked with it in her hands and feet, so as to throw her into a considerable degree of alarm. Upon inquiring into the patient’s age and state of health, I was informed that she was between 40 and 50, that menstruation was on the point of leaving her, and had of late appeared very irregularly, and that she had a considerable oppression in her head. The cause was therefore obvious, and the cure was not difficult; for it yielded to a moderate venesection, and an habitual attention to the state of the bowels.†

Sometimes the muscular contraction is sufficient to bend the joint, and then various irregular

* Zoonomia—Catenation, s. 17, i, 8.

† Dr. Good, Study of Med. Neurot., art. Clonus Subsultus.

jerking movements of the limbs occur, as in the following case, incidentally related by Messrs. Griffin. "A large blister was at length applied to the sacrum, and on the next day there was no return of the pain (an intermittent neuralgia); but singular to say, at the usual hour of its attack, her legs were affected with an uncontrollable restlessness, and she was forced to keep up a continual sort of kicking motion with them, as she sat in her chair: this, however, eventually subsided."*

HYSTERICAL JOINTS.

In more aggravated forms of this affection, the large muscles which bend the joints are spasmodically and permanently contracted, and one limb is constantly bent at a right or acute angle upon the other, or, on the other hand, it is inflexibly straightened. In these cases great anxiety is generally created, for the affection so closely resembles the disease termed ulceration of cartilage, that in many cases it is quite impossible to distinguish the true from the mimic disease.

It is not very long since, an eminent surgeon, attached to one of our public hospitals, amputated the leg of a girl on account of extensive disease,

* Op. cit. p. 178.

as he supposed, in the knee-joint. On the conclusion of the operation, he took up the limb and cut open the joint, intending to demonstrate to the students, who crowded round him, the morbid tissues. To his intense mortification, not a vestige of disease was apparent, and he stood publicly convicted as amputator of a healthy limb.

But sometimes the sufferings which result from hysterical spasm are so severe, that the patient entreats the surgeon to remove the limb. Several cases of this kind have occurred—cases in which the surgeon, fully aware of the nature of the case, not anticipating disease of structure, has, at the patient's earnest solicitation, performed the operation. Temporary relief was usually gained, but after a time the relentless disease fixed itself in a new situation, and inflicted tortures equal to those which had, perhaps, induced the wretched victim to part with a quarter of her body.

Mr. Mayo* records a case in which amputation was performed above the knee. A very short period after the wound had healed, the patient struck the stump against some object, and from that time it became the seat of pain, as intense as that which had persuaded the sufferer to lose her limb. A second operation was performed, and the stump and lower part of the thigh re-

* Outlines of Pathology.

moved by knife and saw ; but as soon as the wound healed, the old pain visited the new stump. The next surgical caprice was the division of the sciatic nerve. Again the suffering was alleviated for the moment ; but no sooner had the wound healed, than it returned with undiminished vivacity. As these three operations had already curtailed so large a proportion of the leg, without benefiting the patient, it was thought wise and proper to remove the morsel that was left. The thigh-joint was accordingly cut open, and the head of the thigh-bone abstracted. A temporary respite was, for the fourth time, obtained, and the further progress of the ease I have been unable to follow.

A second ease is related by Sir B. Brodie, in which the leg was removed above the knee, but shortly after the stump became affected in the same way as the knee had been.

Mr. Soden, of Bath, saw amputation performed under similar circumstances, with a similar result. Now if these cases go for anything, they clearly prove the necessity for distinguishing "ulceration of cartilage," a disease imperatively demanding an operation, from hysterical spasm, a disease in which an operation is worse than useless. But how are we to distinguish these eases? Hysterical spasm, like ulceration of cartilage, bends the

joint at a certain angle, and renders it inflexibly rigid, painful, and exceedingly sensitive on pressure or motion; and frequently, also, fixes the patient in one position upon the bed or sofa. So far, therefore, the two affections run parallel; but there are certain points, which, if carefully observed, will, in the majority of cases, lead us to a correct judgment. Thus:—

Ulceration of Cartilage.

1. The patient has a general aspect of disease. Her frame is wasted, her cheeks pallid, her pulse constantly accelerated, 90 or 100, or higher, in a minute. *But in the early stage of the disease the constitution does not suffer in so marked a manner.*

2. The muscles round the affected joint are flattened, flaccid, and wasted; or they swell, from the formation of abscess, marked by shivering, fluctuations, &c.

3. Frightful dreams and convulsive starting of the muscles round the diseased joint, attended with excessive agony, during sleep.

4. Breaks down the constitution, and in an advanced

Hysterical Spasm.

1. The patient *may* have a general appearance of health, florid cheeks, well-nourished body, and average pulse; or she may be chlorotic and thin, with pale cheeks, pulse quickened by exertion or emotion, &c.

2. The muscles round the affected joint are, if anything, tumid and elastic, from turgidity of the blood-vessels. If there be a defined swelling, it is much more like a giant wheal than an abscess. But in inveterate cases the muscles waste, and become flattened.

3. Patient is sometimes prevented from falling asleep; but once asleep, her slumber is tranquil, and undisturbed by pain.

4. Endures many months, or even years, the patient continu-

stage is rapidly terminated by death.

5. 0.

6. On pressing the head of the bone into the joint, excessive pain is produced. The skin and parts external to the joint not particularly sensitive.

7. 0.

8. 0.

9. When this disease (affecting the hip) is far advanced,

ing to enjoy tolerable health, and at last, perhaps spontaneously, or under the influence of mental emotion, or after an accidental wrench, suddenly ceases, the patient sometimes experiencing a sensation of something snapping or giving way in the joint.

5. Other hysterical affections have preceded, or coexist, or alternate with the hysterical spasm.

6. The pain is more superficial than deeply-seated. Pinching the skin, and light pressure, causes as much or more pain than firm pressure; and if, by conversation or otherwise, the patient's attention be abstracted, the head of the bone may be squeezed into the joint without producing remarkable suffering.

7. Pain similar to that produced by manipulating the joint is elicited in other situations, by sudden jerking or heavy pressure.

8. In some cases the joint suffers a sort of local ague. It is cold and pale, or livid in the morning, becomes warmer in the afternoon, and toward evening is hot, red, swollen, tense, and shining.

9. In old cases of hysterical spasm of the hip-joint, the limb

spontaneous dislocation sometimes occurs, and the length of the limb is diminished.

10. When the knee is affected, this joint is almost invariably bent: so of the elbow-joint.

is apparently shortened; but careful examination shows, that this depends upon a strange twisting or obliquity of the haunch, the result of the continual tension of the rigid muscles.

10. When the knee is affected, this joint is sometimes kept straight by spasm of the extending muscles: so of the elbow-joint.

PARALYSIS.

“A servant girl, about 20 years old,” says Dr. Watson, quoting from Dr. Abercrombie, “sprained her back in lifting some heavy article of furniture. She felt no great inconvenience at the time; but some little while after weakness of the legs came on, and gradually increased to complete paraplegia (palsy of the lower extremities). After an interval, the affection extended to her arms, and she then had not a vestige of motion of any of the parts below the head, except a very slight movement of one of the fingers; but the internal functions were all perfect, and her utterance was distinct, except that in speaking she was sometimes seized with spasmodic twitches of the lips and lower jaw. She lived in that state, without any change of the symptoms, and her general

health continuing good, for about *twenty years*. In the morning she was taken out of bed, and placed in a chair so contrived as to support her in a sitting posture. Her arms rested on a cross-board which passed before her; and if by any accident one of them slipped from this support, she had no resource but to call for the assistance of another person to replace it. Having been on one occasion left alone for about two hours, after one of her arms had thus slipped down, her hand had become extensively œdematous (infiltrated with water). In the same manner, if her head fell forward upon her chest, it remained in that position until raised by an attendant. Her mind was entire. She died after four days' illness, with symptoms of low typhus fever. You may suppose that Dr. Abererombie looked with the greatest interest for the cause of these most remarkable symptoms. 'I examined the body with the utmost care,' says he, 'along with Dr. Pitcairn, who had been in the habit of seeing her for several years, *and we could not discover any disease, either in the brain or in the spinal cord.*'"

A widow, aged 37, mother of five children, entered La Charité, complaining of violent palpitation and pain in the left side. Bloodletting, leeching, and strict diet abated these symptoms; but they were succeeded by excessive pain of the

right side of the head, which was relieved by the applications of cold water in the night. Whenever it was thus relieved, she felt distressing numbness and stiffness in her limbs. In a short while she entirely lost the use of her right arm and leg, both as regards motion and sensation. After some time the right leg, which, though disobedient to the will, had remained limp and supple, stiffened, and became as hard, and almost as inflexible as a gate-post. Both thumbs were taken in the same way. The next day the patient experienced a considerable impediment in swallowing, and lost her voice. These and other hysterical affections, however, vanished upon the appearance of the menses, and the patient got quite well.*

TUMOURS.

“As this disease infests almost all the internal parts, so also it sometimes attacks the exterior, and affecting the muscular flesh (to wit, the jaws, the shoulder, the hand, the leg, and the shin), causes at one time pain, and at another swelling; of which affections the tumour of the skin is particularly conspicuous. For, while in dropsical swellings we always observe that the tumidity is

* Journ. Hebdom. 1827.

greater in the evening, and like wet paste receives and preserves the impress of the finger, this hysterical tumour is greater in the morning, and is quite unyielding to the finger. Generally it inflates only one shin : but in other respects, whether we consider its magnitude or its surface, it resembles dropsical swellings so exactly that it is difficult to persuade the patient of its dependence upon any other cause.”* In illustration of the same subject Sir B. Brodie remarks, “I have seen several cases of a singular affection of the hand and wrist, which manifestly belong to the class of cases of which we are now treating. It occurs in females who have a disposition to hysteria, especially in those who have suffered from mental anxiety and over-exertion, and is usually but not constantly referred to a sprain, or some other slight accident. The patient complains of pain in the back of the hand and wrist, trifling at first, but gradually becoming more severe. In many instances, after some time has elapsed, there is a diffused swelling of the soft parts, extending a short distance up the lower extremity of the forearm, and downwards as low as the fingers. This swelling is not attended with redness of the skin; and having lasted for a few weeks, it subsides, while the pain remains constant in its character,

* Sydenham, de Affect. Hyster.

aggravated by every motion of the limb, and always more severe in proportion as the patient's attention is in a greater degree directed to it. To prevent the motion which she so much dreads, the patient keeps her hand in one position; and the consequence is, that the joints become comparatively stiff, the hand at the same time having a very characteristic appearance, the skin being smooth and shining, and appearing to adhere more closely than is usual to the parts beneath. This state of things may continue for three months, for six months, or even for one or two years, the symptoms then gradually subsiding without leading to any further ill consequences. The result, however, is not always so fortunate. I attended a lady who laboured under the symptoms which I have just described, with the late Dr. Luke. She left London on a visit to the Continent without any amendment having taken place. I saw her again after the lapse of four or five years: the muscles of the fore-arm were at this time wasted and paralytic; the whole hand was shrivelled and useless; the fingers permanently contracted towards the palm of the hand; the nails thin and scabrous."

Another form of hysterical swelling is recorded by Dr. Graves. The following is an outline of the case:—"The patient is a young lady who had

the catamenia suppressed at the age of 16, and who had been for some time in a bad state of health. After an accidental diarrhoea, which weakened her greatly, she became subject to a very curious affection of the feet and legs. The attack generally commenced at night, involving the foot, ankle, and leg half way to the knee. It is generally confined to one foot and leg at a time, and when it subsides in one extremity begins in the other. The affection commences with heat and tingling of the sole of the foot, then of the instep, ankle and leg, as high as the middle of the calf. These symptoms go on increasing for some time, the sensation of heat becomes extreme, and the pain agonizing. In proportion to the increase of these symptoms, the vascular congestion and fulness of the limb are augmented, the smallest veins are rendered distinct, and the larger ones become prominent. This state lasts for eight or nine hours, the sensation of heat and pain being all the time nearly insupportable. The resulting congestion of the cutaneous capillaries occasions a change in the skin, which, as the fit proceeds, grows at first red and then gradually assumes a more suffused appearance, and a deeper hue, until it becomes swollen, smooth and shining, and resembles very much in colour a black cherry when nearly ripe. When the hot fit ceases, the slight

swelling and this discoloration subside, and the affected parts remain during the next stage pale, deadlly cold, and comparatively free from pain. While one leg is in the hot stage, the opposite leg is cold and pale, but free from pain ; but as soon as the pain and heat have disappeared in the limb first affected, the same series of phenomcna commences in the other leg, and lasts for the same length of time ; after which, both limbs are in their natural state, and for two or three hours she is comparatively free from suffering, although some uneasiness still remains, which she compares to a numbness, or some such morbid sensation not easily defined. This disease commenced three years ago, and its paroxysms have returned every day since. In 1837 the pain was intolerable, and the daily amount of ease she enjoyed did not exceed three hours ; this occurred quite regularly, beginning about four o'clock, and lasting until seven in the morning, during which three hours she had some sleep. Now (Oct. 1840) the intermission occurs at eleven a.m., and continues until seven in the evening. In 1837 she could not sleep at all, when either foot was in the hot fit, so great was the pain ; now she enjoys tolerable rest at night, although one or other of the extremities is in the hot stage during the whole time she is in bed. She is much improved in appearance, and though of

slender form and tall, she has become sufficiently fat ; and being a person of most placid temper and great beauty, no one who sees her in the drawing-room, apparently in all the bloom of health, would suspect her to be such a martyr ; even now she is obliged to sit or recline on the sofa during the entire day, for if she walks much about the room, the hot fit in her limbs is immediately brought on. The suppression of the catamenia made us at first consider this strange affection as a variety of hysteria, but in about six months the female function resumed a perfect regularity without bringing the slightest alleviation of the symptoms. Every variety of lotion, cold and hot, stimulating or narcotic ; of ointments, bandages, poultices, affusion, were successively tried, and the parts were often leeches in the hot stage, but without any relief. Internally quinine, arsenic, iodine, hydriodate of potash, chalybeates, purgatives, diuretics, and mercurializations, have all successively failed, nor has she ever received the slightest benefit from any anodyne medicine whatsoever."

There is a third tumour of the extremities which I have not unfrequently seen in hysterical subjects, and which I believe to depend upon this condition of the system—I allude to those tumours which are called nodes, periosteal swellings, &c.

The patient, usually a girl suffering from irregularity of the menstrual secretion, and hysterical symptoms more or less marked, perceives upon her shin or arm a hard swelling, which gradually increases so as to occupy a very considerable bulk. It appears to proceed from the bone. The skin over it is unaltered. It is not very painful except under pressure. I remember what appeared to me a case of this kind in a patient of Mr. Key's, to which I have had occasion to refer more than once. The patient, an unmarried woman, of about 30 years of age, of a scrofulous complexion, stout habit, and flabby muscle, who bore on the skin of the extremities the scars of old and cured scrofulous ulcers, was admitted into Guy's Hospital for a swelling of this kind, which occupied the right shoulder. The bones forming the joint appeared generally and uniformly enlarged. It was not very painful when left to itself, but excessively so when handled. Together with this, there existed neuralgia of the ulnar nerve of the same side, through its whole course down to the very tips of the little and ring fingers. Pressure upon this nerve caused pain along the inside of the arm, from the tips of these fingers to the shoulder, and from the shoulder to the right breast in front, and to the blade-bone behind. If a finger were put upon any part of her body, she would start and

scream as though she suffered the greatest agony, and was in this way several times brought to the very brink of a fit of hysterics. Emplast. hydrarg. cum ammoniaco was applied locally, and iodide of potassium administered internally, and the swelling after a time subsided. A second girl, aged 17, by her appearance, and suffering from disordered menstruation, was admitted under Mr. Key's care for a similar tumour of the right fore-arm. It occupied the back of both bones over a space of perhaps six inches in length. It was less tractable than the former case, and after a time I lost sight of the patient. In this case also there were manifest marks of the hysteric constitution—a flightiness of manner—vivacity of speech—constant giggling, and other characters more easily observed than described.

HYSTERIC CENTRE.

A person subject to hysterics, or any form of hysteria, will sometimes point out to the physician, or the physician, on the other hand, will sometimes point out to her, the existence of a tender spot somewhere in the body, which tender spot differs remarkably from that general tenderness of which such a patient usually complains. This

tender spot I call the hysteric centre, because, if subjected to pressure, that peculiar form of hysteria which forms the patient's complaint is suddenly induced.

Sir B. Brodie relates two cases in which this hysteric centre was found at the pit of the stomach. An unmarried lady, 32 years of age, subject to fits of difficult breathing, with a feeling of tightness of the chest, and great general excitement and agitation, lasting from ten to fifteen minutes, and recurring at irregular intervals, believed that her malady was somehow connected with a certain spot at the pit of the stomach, for pressure with the finger upon that spot never failed to bring on the fit above described.

The second case is that of a married lady, 20 years of age, and liable to attacks of ordinary hysterical convulsions. This lady also pointed out the existence of a spot near the pit of the stomach, which when pressed by the finger, caused excessive pain, and violent but disorderly muscular agitation of the whole body.

The locality of the hysteric centre is sometimes determined by an accident or injury. Thus suppose a person of a highly nervous or mobile constitution to break an arm. Well! the limb is set and inclosed in a proper apparatus, but in a few hours excessive pain is excited in the injured

part—pain far more severe than the mere amount of local mischief can account for, and even sometimes increasing to agony. Shortly after the muscles become convulsed, and the apparatus displaced and rendered useless. Then the pain travels up the arm to the shoulder and side, and breast, and general convulsions and true hysterics, or some of its singular modifications, ensue. Or a young lady pricks her finger with her needle: the punctured spot becomes painful and tender, and frequently the pain, radiating thence as from a centre, rises up the arm, and affects the neighbouring parts of the trunk, and induces hysterics, syncope, catæhus, or any other allied affection. Or a person having been bled in the arm, the scar becomes the seat of constant or intermittent, annoying or agonizing pain. And again, from this centre various hysterical pains and twitches diverge. Sir B. Brodie relates cases which illustrate each of the forms above described.

But perhaps the spine is more frequently affected in this way than any other region of the body. “Naney O’Brien, aged 35, is frequently attacked with a feeling of numbness in her fingers, which gradually extends up the hand to the mouth, and through the jaws and tongue, preventing her from speaking. She is then seized with sickness of stomach and headache, and when this last is

severe, with fits of insensibility." The first three—those in the neck, and immediately below the head—of that row of prominences (called spinous processes) which traverse the centre of the back—the first three of these prominences are tender, "but pressure on the second brings on sickness of stomach and headache."

"A young lady, aged 17, of delicate frame, light hair, and fair skin, was affected with a frequently recurring cough." Of the spine-prominences, those that occupy the neck, and the four upper of those which pass through the back, were tender. "Pressure on any one of the four latter instantly brought on coughing."

"A lady, aged 17, was afflicted with headache, sickness of stomach, dry harsh cough, variable pains and soreness in different parts of the body, feverishness, and general debility. Great tenderness of the second spine-prominence was discovered; pressure there occasioning acute pain on the top of the head and brow; pressure on the lower neck and upper back-prominences excited pain there, and loud coughing; at the seventh or eighth back-prominence, the same symptom with pain in the chest."

"Kitty Farrell is a widow, aged 43, oppressed by many hysterical symptoms, as tremblings or shiverings, palpitations, flying pains, general de-

bility. Sometimes she is taken with fits of uncontrollable laughter, followed by faintness, swelling and choking in the throat, sense of suffocation, &c. Sometimes she is struck with numbness and palsy of the right arm, which sometimes last for hours. There is tenderness of the middle back-prominences, and also tenderness, but in a more marked degree from the fourth to the eighth or ninth. Pressure on any of these last, especially the seventh or eighth, brought on violent pain, which darted forward to the pit of the stomach, and the patient exclaimed she thought her heart would break."

The above cases are from Messrs. Griffin, who also relate a case in which pressure upon the seventh or eighth back-prominence produced instant hiccough and eructation.

The breast-bone is sometimes the hysteric centre. Mr. Laycock observes: "In a female named Cleary, now in the hospital, under the care of Dr. Simpson, a slight touch or gentle pressure on the breast-bone, above or below according as the patient is more or less irritable, will cause cough immediately. I have ascertained the fact beyond all doubt.*"

Sometimes a quite frightful effect appears to be produced by pressure upon the hysteric centre. Messrs. Griffin, speaking of a girl, aged 22, say

* On Hyst., Edin. Med. and Surg. Journal, vol. 1, July, 1838.

thus: "To ascertain whether the seventh or eighth dorsal vertebra was as usual more affected than other parts of the spine, we were induced to make pressure there; when she instantly tumbled forward in a fit of insensibility, and would have struck her face against the floor, had she not been caught by a person who stood near her."

Of a second patient they assert that, "on touching the second cervical vertebra, she sprang up with frightful suddenness, as if a needle had been driven through the spinal marrow, and then as instantly fell back in a state approaching to insensibility. Out of this stupor she sprang twice with the same electric suddenness, and as often fell back powerless—her countenance during the moment expressing the utmost terror and agitation, and her respiration becoming heavy and oppressed. As soon as she could speak, which was at first in a broken affrighted manner, she said that the instant her neck was pressed, her arms, and all parts of her person above the pit of the stomach, felt as if suddenly numbed or paralysed. There was a numbness and sensation as if from the pricking of pins and needles tingling through her face, jaws, temples, arms, and to the tips of her fingers."

CHAPTER V.

HYSTERIA AFFECTING THE MIND.

“From hence proceed a brutish kind of dotage, troublesome sleep, terrible dreams, a foolish kind of bashfulness in some, perverse conceits and opinions, dejection of mind, much discontent, preposterous judgment. They are apt to loathe, dislike, disdain, to be weary of every object. Each thing almost is tedious to them. They pine away, void of counsel, apt to weep and tremble, timorous, fearful, sad, and out of all hopes of better fortunes. They take delight in doing nothing for the time, but love to be alone and solitary, though that does them more harm. And thus they are affected so long as this vapour lasteth, but by and by they are as pleasant and merry as ever they were in their lives; they sing, discourse, and laugh in any good company, upon all occasions. And so by fits it takes them now and then, except the malady be inveterate, and then it is more frequent, vehement, and continue. Many of them cannot tell how to express themselves in words how it holds them, what ails them. You cannot understand them, or well tell what to make of their sayings.”—BURTON, *Anat. of Mel.* Part I, Sec. iii, 2, 4.

I HAVE hitherto described hysteria as it affects the organic functions; let me now consider how it affects the mind. If, therefore, we regard the mental and moral manifestations of hysteria, we still find the same diverse, unsteady, inconstant, or even inconsistent phenomena. The predominant trait, however, is exalted excitability, with feebleness of volition. Hence we find the hysterical

incapable of continuous thought, incompetent to the higher efforts of reason. They are averse to abstract study and to anything that requires fixed and steady attention. If in their solitary moments they begin to ponder upon a subject, some associated idea soon diverts their attention; and this after awhile suggesting a new field of speculation, their fancy, manacled by the chain of association, is irregularly and rapidly dragged through the vast and (when thus trodden) unprofitable region of thought. Hence these persons become dreamers, speculators, enthusiasts, poets, somnambulists, mystics, fanatics, hermits, doubters, sceptics, monomaniacs, or, in the more malignant form of the disease, absolute madmen. Their disturbed intellect is no longer a glassy lake, embosoming bright images from heaven and earth, but a wild cataract enveloped in curling mists. The waves of fancy dash incessantly downwards, and the rocky impediments of reason only serve to heighten the foam and clamour. Who therefore will be surprised at the manifold conceits, delusions, and sillinesses engendered by this complaint? Who will not anticipate moral obliquity and mental aberration? Who will be unprepared for that hideous farrago of extravagance, imposture, mendacity, impudence, immodesty, viciousness, or villany, which it will be our duty to unveil? Who

will not expect the intellect itself gradually to vacillate, and at length sink for ever beneath the stormy contest? If we require examples, a mere glance at the pages of history will furnish them in abundance. In what other manner can we explain the fiendish crimes of a Marchioness de Brinvilliers, the ridiculous ambition of a Pope Joan, the angelic visions of a Saint Teresa, and the ghostly conversations of the heroine of Cock Lane? Instances such as these are doubtless rare and exceptional. They form the culminating point of a steep ascent, around whose base and sides wander many thousand erring souls.

If we are required to depict the more ordinary forms of hysterical alienation, I know not that we could do better than refer to the words of Sydenham. "For since an incurable despair is the groundwork of this disease, the patient conceives the highest indignation if any one attempt to insinuate a hope of recovery; believing, moreover, that she is doomed to suffer all the ills incident to humanity, filled with the gloomiest forebodings, and ceaselessly conceiving fear, anger, jealousy, suspicion, and the direst passions and emotions, and nursing them in her anxious unquiet bosom. Joy, hope, gladness are infrequent and transient visitors, but while they remain they affect the mind no less violently than depressing emotions: so

that these hysterical patients can observe moderation in nothing, and are constant only in inconstancy. At one time they manifest extravagant love, at another causeless hatred for the same object. Now they entertain a project, and presently recoil from it, and rush into its opposite, but neither are they able to complete this, for their unstable disposition permits no interval of repose. And the remark of the Roman orator concerning the superstitious, applies equally well to these, our melancholics,—‘ Sleep itself, the customary refuge of toil and care, generates new anxieties and new apprehensions ;’ for frequently in dreams they behold funerals and interments, and the ghosts of departed friends. Thus they do penance in mind as in body, as though life were a mere purgatory, in which we expiate offences committed in a former state. Nor is this true only of the mad and maniacal, but of those also who, if we except these perturbations of the mind, possess great judgment and philosophy, and who, in profundity of thought and wisdom of speech, far excel those whose minds have never felt the stings of reflection: so that Aristotle’s remark, that the melancholic surpass others in talent, was not devoid of reason.” Such is an epitome of these affections, which, however, it will be necessary to illustrate by a few examples. I know a young lady, 20 years,

of age, whom I will call Caroline. She is tall, slender, with a fair complexion, blue eyes, and flowing auburn tresses. Her features are sharply defined, and would suggest to Lavater an observant quick disposition, which indeed would quite accord with the truth; and perhaps the somewhat thin lips and flexible facial muscles might also discover to him her rapid, impatient, sarcastic temper. Her talents are various. The piano, the easel, the languages, divide her attention. Whatever she attempts to learn, she acquires with facility; but this facility is the most fatal obstacle to her progress, for having demonstrated to herself and others, that she can accomplish her object, if she like, she throws it by, and takes no further interest in it. She is a pitiless caricaturist, and therefore much feared and disliked; but at the same time her temper is naturally amiable, and though she frequently wounds by sly inuendo or abrupt rudeness the feelings of her friends, she suffers afterwards sincere remorse. Her mind is like the ocean that lashes the Cape of Storms, at the surface much foam and convulsion, while its deeps remain serene and illuminated by brilliant jewels. She reads a great deal, and thinks a little—hence she has conceived the greatest horror of those who are stigmatized as romantic, sentimental young ladies: and this leads her into the

opposite extreme. To avoid as far as possible the phrases of the Minerva press, she apes the talk of her brother, a youth whose delight centres in his yacht, and who thinks the blue jacket the only garb fit for a gentleman. To hear Miss Caroline's nautical vocabulary, one would imagine she had never listened to other conversation than that of skippers and fishermen. Happening lately to pay her a visit, I was shown into her studio. The walls were covered with unfinished paintings. The harp stood in one corner, and various pieces of music strewn the floor. A work-basket full of skeins of silk, thimbles, and a broken crochet-needle, a half-worked anti-macassar, the Times of that day, folded so that it was clear the lady had recently been perusing the leading-article, a volume of James's last novel, with a leaf turned down at the seventh chapter, formed the furniture of the table. On the mantel-piece stood a row of chemical test-glasses, and a small electrical apparatus; and the bookshelves exhibited a formidable collection of grammars and dictionaries, English, French, Italian, and German. Hardly had I completed a hasty survey of the room, when I was startled by a loud boatswain's whistle. It seemed to be a sort of signal, for it was immediately answered from a distant quarter. Then followed a burst of uproarious laughter, and shortly after-

wards Miss Caroline entered the apartment. We immediately began to talk politics; thence we diverged into metaphysics, but we had scarcely touched upon Kant's pure reason, when the fair controversialist started up as though moved by an uncontrollable impulse, and hurried me into the drawing-room. There, seating herself at the piano, she began to play with great enthusiasm the "Rataplan." She began in pretty quick time; but as she advanced, her fingers went faster and faster, till at length, unable to express on the instrument, or keep pace with the giddy velocity of her ideas, she swept down the keys with one grand crash and terminated the performance. In an instant she had risen from her seat, and began upon something else, and thus she continued restless, impatient, digressive, till my visit was concluded. Her mind was a mere kaleidoscope, suffering alteration with every incidental disturbance. This young lady is subject to various forms of hysterics and hysteria.

Another young lady, Miss Rosina P——, a person of an ardent temperament, had the misfortune to form an acquaintance with a certain sectarian minister, whose charity is less conspicuous than his zeal. The result was quickly manifest. Neglectful of her obvious filial and domestic duties, Miss Rosina became a constant attendant, not

only at the frequent chapel services, but also at those spiritual reunions at which her good pastor almost daily presided. Here her imagination was excited, and her ardour fanned by alternate descriptions of celestial bliss and infernal torment. Here, also, new schemes of proselytism, many of them consisting in audacious intrusion into the privacy of families,—many of them involving the sacrifice of all delicacy of feeling—many also marked by unscrupulous deviation from that honorable faith and sincerity of speech without which religion is but a dead letter, many of them a mere web of trickery and deceit, were planned and anxiously discussed. Returning to the bosom of her family from scenes such as these, the conduct of the young lady could scarcely fail to annoy and wound her relatives, for she had become an intolerant critic and harsh denunciator of the innocent gaiety of her sisters, a severe judge of her parents, a censorious detractor from the merits of her friends; she renounced the ordinary form of speech, and adopted instead a kind of scriptural cant, in which she contrived to defile the most sacred names, by associating them with low and ludicrous images. She constantly endeavoured to gain converts to her opinions, but the bitter austerity with which she urged them only served to disgust and alienate her acquaintance. The Bible

and Prayer-book were her sole study. Ordinary accomplishments she despised ; carnal knowledge of every description was infinitely beneath her. She continued in this unhappy frame of mind for many months. At length an aunt, who lived at a distance, invited her to spend a few weeks with her, and the invitation was accepted. The old lady, a person of solid judgment and cultivated mind, had heard of the strange aberration, for it can be considered no less, into which her niece had fallen, and wished to dispel it. Her plan was the following : as soon as Miss Rosina began her propagandist attack, the aunt listening with a great deal of attention, and raising only a slight and very vineible objection now and then, professed at last, that, as far as she understood the argument, her niece appeared to have much reason on her side ; but that she thought her apprehension of the doctrine would be clearer if the arguments were fairly stated on paper, and she therefore engaged her niece to write out a full statement of her opinions, and of the proofs by which those opinions were supported. This her niece readily promised to do. The next morning Miss Rosina retired to her chamber, and commenced her business ; somehow or other, although fully satisfied of the infallibility of her faith, she had a great deal of trouble in putting together such an array

of arguments as she deemed requisite to convince another ; and the morning passed away before she had completed her work. At dinner the aunt avoided the subject entirely, and after dinner led her niece into the garden, and pointed out to her a variety of beautiful flowers, relating at the same time many anecdotes connected with the subject, and explaining the admirable adaptations of means to an end which they display, and touching on many interesting phenomena of vegetable life ; and the time passed in animated conversation. The next day Rosina repaired again to her chamber, put the finishing touch to her theological performance, and presented it to her aunt, who promised to read it and communicate her reflections in a similar way ; and afterwards they again sought the garden, and here, under the shade of trees (it was summer time), or by the waterfall, or among the flowers, they fell into a train of thought suited to the scene, and discoursing of the wonders of Nature, and (rising from Nature to Nature's God) of the benevolence of the Creator,—they spent some delightful and tranquil hours. According to her promise, the old lady perused the disquisition of the young lady, and in her return epistle gently noticed one or two incongruities which she could wish explained. This set Miss Rosina, who was not without talent, and plainly perceived the in-

consistencies alluded to, at work again. She racked her brain for arguments, and arguments came, but for the most part so palpably fallacious, that she immediately rejected them; and she at length began to entertain a suspicion of the truth of her dogmas, more especially since the better she became acquainted with her aunt's capacity, the more diffident she became of her own. In short, after a space of time the aunt came out of the battle victorious, and Rosina confessed that, in attempting to convert her kind friend, she had only unconverted herself.

Had this young lady been a Papist, it is probable that she would have taken the veil; and then the cruel penance, prolonged abstinence, and brooding meditation, familiar to the convent, would have confirmed and increased her malady: "For such was the discipline by which the lovely and blooming, and sincerely devout Saint Teresa was prepared for ecstasies and visions, and led to impose upon herself and all that beheld her; and seriously to believe, in the fervour of her mind, that her body was lifted from the earth; and that she heard the voice of God, saw our Lord with Saint Peter and Saint Paul standing on her left hand; by the first of whom the cross which was at the end of her beads was miraculously transformed into four large gems, incomparably more

precious than diamonds, with many other marvellous revelations, which we cannot find room to detail. Though it should be noticed that devils appeared to her as well as blessed spirits, whom she always kept at a distance by sprinkling holy water; and that she was an eye-witness to the joyful escape from the flame of purgatory of the purified souls of Father Peter of Alcantara, Father Ivagnez, and a Carmelite friar.”*

In one of Miss Bremer's admirable novels there is delineated a character in which that intense mobility which we call hysteria is strikingly exhibited. The extracts which follow may, therefore, not be unacceptable to the reader. “ ‘ I confess,’ said Miss Greta, speaking of Nina, the President's daughter, ‘ that she appears to me the most beautiful creature that God has created—only too ethereal—rather a celestial than a human being. One fancies she might, as it were, resolve into vapour.’ ‘ Exactly so, exactly so; I myself like people who have flesh and blood. I should not like to have a wife who made one fear she would fall in pieces on the slightest touch. But sure it is, that there is something bewitching in Miss Nina's manner and appearance. One's eye follows her with admiration, and there is no

* Dr. Good, Nosol., art. Alusia Elatio; quoting Butler's *Lives of the Saints*.

withdrawing the thoughts from her. A veil of melancholy, as it were, floats about her. You fain would lift it up and disclose the sweet mystery it conceals; for her sadness appears so lovely, that it affects the heart with a wonderful complacency. You see that it is no present pain which occasions her sorrow. It looks like the remembrance of disappointments, whose cup has long been emptied; or a dim foreboding of prospective suffering. God protect her! He must indeed be a fiend who would do her any harm. It is a pity that she is so pale,—she is as white as alabaster, but at times clouds, as it were, pass over her,—look you at this moment,—clouds which take a roseate hue from the rising sun'

“Nina had unbound her soft, bright-coloured hair, but seemed to have forgotten to arrange it for the night. She sat there with her countenance buried in her hands, her elbows resting on the table; her hair flowed down in full undulations over her finely-turned, snow-white arms. So she sat a long time, rather dreaming than thinking; and half-suppressed sighs at intervals heaved her breast. Her aspect touched Edla. The meditated severity melted in her heart. Nina had not observed Edla enter; but a hand, which passed lightly and caressingly over her head, caused her to look up, and her eye encountered the friendly

inquiring glance of Edla. There was something unusually tender in Edla's glance, and in Nina's bosom there was a chord which moved responsive to the slightest touch of kindness. She rested her hand on Edla's arm, and looked up at her with her angelically fair but pale countenance, on which confidence and a sort of melancholy joy were depicted. 'So pensive, and wherefore?' Edla asked; and her calm voice, her clearness and decision of understanding and manner, exhibited a striking contrast to Nina's character, which was almost resolved into loveliness and melancholy. 'I do not know myself,' answered Nina, 'I would that you could enlighten me; I feel as if clouds were passing over my soul. They trouble me.' 'And these clouds, have they any distinctness of form, any significance?' 'No, at least no clear form or significance; but they come frequently; I would I could penetrate them: they veil from me a clearness which my soul presages. Ah! Edla, tell me, what is life? What is the signification of to live?' "

In the ensuing passage the reader will find a beautiful and truthful portrait of that malady which has been described (pp. 72-4) under the name of catochus. "'I am weak,' said Nina, putting away an involuntary tear with her finger. 'You are so,' said Edla, with a seriousness which

bordered on severity. 'But, Nina, we should be ashamed of our weakness, and task all our strength to combat it. Lamentable imbecility alone mourns over without elevating itself. It is a dreadful thing to merit self-contempt; but this is the lot of the feeble woman. She knows not what the signification of self-command is; she is a stranger to the felicity of being able to say to the accidents of life, You cannot bewilder me; to pain, You cannot crush me. To-day she repents of the fault she committed yesterday; to-morrow she will commit it again. She fain would elevate herself and grow strong, but time passes away in indolence and unaccomplished wishes. She does not know what it is to combat nor to conquer; she sees the precipice, but has not the strength to draw from it. How pitiable—how contemptible! Nina! you turn pale.' 'It is nothing—it is passing off. Edla, your words—Edla, do not despise me;' and she looked anxiously up to her with her hands folded. 'Be calm, be quiet, my good child!' said Edla with tender earnestness, rising as she spoke: 'You are not the weak one whom I have portrayed, and never will be. I would not live to see the day when you should resemble this picture. Collect your strength to hate and remove it far from you!' 'I shall, I will do so!' said Nina, stretching out her arms towards her sister;

but at the same moment, the outstretched arms dropped down, her head fell back, her eyes closed; she slept. Her forehead was clear; no mark of pain ruffled her fair features; a deathly hue was diffused over her countenance, and her limbs were motionless and stiff. It was death in his fairest form. Edla was acquainted with this sleep, which accompanied the distemper, of which Nina had had frequent attacks in her infancy!"

Considerable distress is sometimes caused in a family when one of its members appears to have quite lost that natural affection which should strengthen the tie of consanguinity. Instances, as in the case of Richard Savage, of mothers who loathe their offspring, of wives who suddenly imbibe an inexplicable antipathy to their husbands, of children who detest their parents, are by no means very uncommon. The daily papers teem with cases of infanticide, and many cases are recorded in which parents have mixed arsenic in their children's food, and poisoned them for the sake of the few shillings given by the burial club, as ruthlessly as a ratcatcher would destroy a rat. "A curious and interesting case," says Dr. Reid, "fell some time ago under my professional observation, of a new species of paralysis—a palsy of the heart, a sudden congelation of the affections. Although before by no means deficient in natural

feeling, the patient could now, as she said, see without emotion every one of her family lying dead at her feet. She continued to be influenced by an anxiety to do what was right; almost the only sense indeed that was left her, was an abstract sense of duty. She had entertained an ardent and tender passion, but many difficulties had been thrown in the way of its indulgence. These, however, had been at length overcome. But when the object approached within her reach, it ceased to be an object of desire. Her love had struggled so long against the current of opposition, that it expired as if exhausted by its efforts upon landing on the wished-for shore.”*—The reader may remember, that in the case related under the head American Spider, it is stated, “She had now an aversion to her relations, and the touch of one of them used to throw her into convulsions.”

There is a tale very feelingly related in one of Miss Burney’s novels—*Cecilia*, I think—which, although purely fictitious, is in exact harmony with the truth. An old gentleman named Albany, relates that, while a young man at college, an attachment sprang up between him and a beautiful girl in an inferior station. After a time he became weary of the connexion, and basely deserted her. Some years elapsed, and they met

* J. Reid, M.D., *Essays on Hyp. and other Nervous Affections.*

again in the tap-room of a public-house. The girl, debased as she was, and infamous in the eyes of society, had yet so much feeling left as to prompt her to throw herself upon the mercy of her former lover, and with passionate energy to implore him to rescue her from perdition. Mr. Albany was deaf to her entreaties, and when she clung to his garments, weeping and professing repentance, unable otherwise to escape from her grasp, he obeyed the whisper of the demon within and struck her to the ground. A second period elapsed, and Mr. Albany began to feel the stings of remorse. He felt he had refused aid to a creature struggling to rise from the abyss of vice and despair into which he had plunged her, and his conscience reproached him by day and by night. He instituted the most diligent search, but nowhere was he able to find his victim. At last unexpectedly he discovered her: and by a species of amiable violence had her conveyed to a respectable roof, decently clothed, and carefully watched through an illness under which she laboured. His anxiety was rewarded by her recovery: and he then sought her presence, confessed his past brutality, narrated the mental sufferings which it had caused him, drew a vivid picture of his remorse, and concluded by pathetically imploring her forgiveness. He waited,

expecting some reply, but no reply came. He renewed his entreaty, but no word of assent or denial could he extract from her pallid lips. And thus till the moment of her death she remained inflexibly silent. In other respects also she maintained the same passive, apathetic behaviour. She would allow others to dress her, to carry her out in the air, to introduce food into her mouth. Of herself she made no motion whatever, she would not even swallow the morsel of food placed by others in her mouth. For many days she remained in this state, and then died.

Hysteric persons have not unfrequently moments in which they feel an unconquerable impulse to do something very strange, very silly, very wrong, or very violent. Thus it happened one day that the lady, whose case I have described (pp. 123-5) under the head of *Hysterie Asthma*, while taking breakfast with her husband, had occasion to stir her tea, but missed her spoon. She then perceived that her husband had taken it, and was actually monopolising the spoons. His own was lying idle in the saucer, while he was employing hers to stir his tea. This fact made a wonderful impression upon her. She felt how cruelly, how heartlessly she was being treated! That her husband should deprive her of her spoon, not because he wanted the spoon, for he had one

of his own, had he chosen to employ it, but merely to deprive her of it, and spoil her enjoyment of her tea, was an act of inhuman selfishness. Her heart beat violently, and she became speechless from emotion. At the same time a fierce longing sprung up in her bosom, impelling her to sweep with a sudden motion of her arm the entire breakfast-service from the table. Could she only demolish the cups and saucers, could she only smash the milk-jug, or merely annihilate the slop-basin ! The temptation became more powerful every moment; and she felt, that were it prolonged but a very short time, she must yield. At the same time she was conscious that the act would be wrong, and strove to resist her inexplicable impulse. Suddenly, however, her tongue was loosened, and she cried out, "Give me the spoon—give me the spoon." Her husband hastened to comply; and, her object thus obtained, the tumult in her bosom instantly subsided, and the spirit of mischief fled.

Sometimes these persons have a strong desire to do something wicked—something horrible; and this, I presume, is what is called by some writers the buffetings of Satan. Thus Dr. Reid has published an extract from the letters of a young lady, in which she laments this unhappy spirit. She says, that even while occupied by her de-

votions, the most impious thoughts occasionally intrude and make her tremble, lest she should draw upon herself the present wrath of God. Sometimes the unhallowed thought finds expression, and her relatives are thunderstruck to hear a torrent of frantic blasphemy or wild licentiousness issue from the mouth of an usually modest and virtuous damsel. Expressions are employed and words uttered, such as would be supposed never to have reached the ears of her who uses them. An utter shamelessness of gesture and recklessness of speech characterise the affection. Details of this malady are unfit for publication, and are therefore rarely published, but those who are experienced have seen frequent instances of it.

“O Mutter was ist Seligkeit?
 O Mutter was ist Hölle?
 Bei ihm, bei ihm ist Seligkeit,
 Und ohne Wilhelm Hölle!
 Jisch aus, mein Licht, auf ewig aus!
 Stirb hin, stirb hin in Nacht und Graus!
 Ohn ihn mag ich auf Erden,
 Mag dort nicht selig werden.”

So exclaimed Lenore, and so have exclaimed many in the madness of despair or of amorous excitement.

But the commonest manifestation of mental hysteria is a peculiar tendency to cunning and imposition. Dr. T. Addison relates, in his Lectures,

the case of a young woman in a humble station, whom he was called to visit, and who was said to labour under the symptoms of stone. Accordingly he found her groaning and complaining of great pain; and she exhibited to him a stone, which she affirmed had come from the bladder. A moment's inspection, however, of the stone, detected the imposture, for it presented all the characters of an ordinary pebble picked up in the street. It is needless to say, that although we speak of stone in the bladder, the correct phrase is calculus in the bladder, for the concretion differs from ordinary stone in a multitude of characters.—There is in the museum of Guy's Hospital a wax model of the leg of a girl, exhibiting an ulcer of very peculiar appearance. The history attached to the model is as follows:—A girl was admitted into the hospital with a sore in the leg. Now the appearance of the sore differed exceedingly from that commonly observed, and the effect of remedies differed still more; for no plan of treatment, and many were tried in turn, improved its aspect in the least. The sore was always red, raw, and inflamed in the morning, but towards evening it assumed a healthier look. This continued so long, that suspicion was excited, and the girl narrowly watched; and then the mystery was explained; for it was ascertained that the girl was in the

habit every night of refreshing the sore with a wash of oil of vitriol.—The late Mr. Callaway attended a young woman for an obstinate eruption; but being unable to cure, or even relieve it, his attention was aroused, and he observed that the eruption only appeared on those parts of the body which were within reach of the patient's hands, and he noticed the fact as singular to her parents at the bedside. On his next visit, the eruption had spread beyond those parts. Suspicion was now changed into certainty, a strict watch instituted, and the girl was detected in the act of anointing herself with an irritating application.

A young woman suffered from sickness of stomach, a profuse flow of saliva, and a sensation as though some living animal attempted to rise up her throat, and then fall back into her stomach. An emetic was prescribed, and she vomited a live lizard.*

“A female in the York Hospital,” says Mr. Laycock, “thrust pins into her breast.”—Dr. Elliotson had an hysterical patient who feigned to vomit blood. Girls of this kind have been known secretly to swallow the blood drawn from other patients, and then to vomit it in the presence of the nurses and physicians.

Dr. J. H. Schulze relates in very solemn Latin

* Med. Chir. Review, vol. xxvii, from a German periodical.

the following marvel :—" A case of this kind was communicated to me by Dr. Wogau, physician at Memming. It occurred in the person of a poor woman, who dragged on a miserable existence for eighteen years, and suffered an extraordinary variety of ailments. At length she began to evacuate live frogs from her body. As soon as this was observed, efficacious purgatives were administered ; and she passed, but not without excessive pain, a number of frogs, and some of them (two or three, if I remember rightly) issued from the vagina. And in this manner she was perfectly cured.— I am informed," continues Dr. Schulze, " of a woman in the neighbouring village who suffers in the same way. Having fallen asleep in a grassy spot, a serpent is believed to have crept into her mouth. And similar histories are rife among other authors."*

" In the town of W——," says Dr. Haindorf, " I was one evening called to visit a young lady who was supposed to be dangerously ill with convulsions. Her relations told me that other remedies having failed, she had for some time past been magnetised by her medical attendant. I found her lying on the sofa in a kind of ecstasy, and was informed that this state recurred several

* D. Jo. Henric. Schulzii App. Pathol. Spec. De Morbis Mulierum et Infantum.

times in the day, but not with so much violence as then. She was accustomed during the fit to speak of higher things, and appeared quite unconscious of the world in which she lived. All belonging to her were assembled about her to contemplate the wonder, as if she were a saint. As the lady had, in the paroxysms of a disease which was supposed to deprive her of her senses, placed herself in the most elegant attitude on the sofa, had arranged her fine hair very nicely, and had bestowed great attention on the choice of her attire altogether; these circumstances, added to the state of her pulse, inspired me with some doubts respecting her unconsciousness and supernatural visions. I therefore endeavoured to comfort those about her by saying, 'Be under no uneasiness, this is an ordinary case. Magnetism is not necessary to cure it. I will only cut off the patient's hair and apply a cold poultice.' The instant I drew out my case of instruments, the lady roused herself from her ecstasy, and has never had a similar attack. She took some strengthening medicine, and is now a stout and healthy young woman."*

Several instances are recorded in the foregoing pages of females, who, in the height of their dis-

* John Reid, M.D., Versuche über Hypochond. u. a. Nervenleiden. Uebersetzt von D. A. Haindorf.

order, have supported life upon quite a minimum of aliment—"Und Honig, ein Tropfen das ist ihr die einzige Speise;" but sometimes, if we believe their own account, they live upon nothing at all. "I knew a virgin," says Domenico Panarollo, "25 years of age, and the scion of a noble family, who, driven to despair by the prodigality of her brothers, and want of affection which they testified towards her, remained twenty-two whole days without food or drink. In the mean time she continued to perform her domestic duties, but growing thinner and thinner every day, at last bore a greater resemblance to a corpse than a living being. Moreover, such was her aversion to food and drink, that neither by gentle persuasion nor harsh threats, could she be induced to swallow anything. In this manner she protracted a miserable existence for twenty-two days, but on the twenty-third she gradually began to eat and drink, and ultimately recovered."*

Sometimes a young woman evinces an extraordinary propensity to lie. She will utter unblushingly the most palpable falsehoods, and that in cases where it would seem no end or purpose could be gratified. And, when detected, she appears to feel no shame, nor to understand why people make such a fuss about it. Her sense of

* Dom. Panarolli, Pent. Obs.

right and wrong is obscured ; she considers it very hard that she should be punished merely for not speaking the truth.

“ Emily —— was the plague of the family. Father, mother, brothers, equally lamented her perverse determination. No one could rely, even in the most trivial matter, on her word. And yet she had many good qualities : her heart was excellent ; she loved her parents ; was impulsively generous to the poor, and frequently acted a self-denying part, but she was mentally blind ; she could not see the ugliness and criminality of falsehood. One day, while her father and mother were absent from home, a gentleman called, and saw Emily. He asked about her parents. She said they were dead ; he appeared to regret this deeply. He then asked some particulars, and Miss Emily gave him a detailed account of the sickness and death of her father and mother. After a few more words the visitor departed, and it was afterwards discovered, immediately left the town and the country. He was an old friend whom Emily’s father was extremely anxious to see, and who could have imparted news concerning a certain prodigal son, who had deserted his father’s house. Thus the reconciliation between father and son was deferred many years through the unheard-of lie told by the daughter.” This

anecdote was related to me by a gentleman, a stranger, with whom I happened to fall into conversation while travelling in a railway carriage.

“ I do remember when I was in France,
Young gentlemen would be as sad as Night
For very wantonness.”

So said young Arthur ; but the wantonness of melancholy is much more common among young ladies than young gentlemen. I remember a girl in Mary's Ward, Guy's Hospital, suffering from this distemper of the mind. I paid her a visit in the morning and found her sitting on the edge of her bed, her arms hanging listlessly on her lap, and her head bowed upon her bosom. I spoke to her, but she never raised her head, and answered every inquiry with monosyllables. Was she better? Yes. Was her appetite good? No. Was she satisfied in the hospital? Yes. Was the nurse unkind to her? No. After a while I left her. In the evening I visited her again. There she sat in the same spot and the same attitude of profound dejection ; and there she sat for weeks together. Nothing could engage her attention—nothing could excite nor amuse her. The physician was in despair, the sister of the ward vexed ; the nurses amazed ; but despair, vexation, and amazement were equally lost on the poor insensible. They made no more impression

than the pills and potions which she swallowed so resignedly. At last her medical attendant signified to the parents that he could do no more for her, and his patient glided out of the hospital as pensively as she had glided in.

It cannot be considered surprising that the various affections related in this work should occasionally rise to the height of insanity. Dr. Burrows has related a very interesting case. "A young lady received an unexpected and very advantageous offer of marriage. Circumstances of a very delicate nature, which she could not impart to the bridegroom, forbade the immediate celebration of the ceremony. But the lover was urgent, and she was fearful of losing her husband; accordingly she consented. The marriage was concluded, and the two, made one, set off in a coach on the usual journey. Circumstances occurred on this journey which tended greatly to increase the excitement and agitation of the bride. The same night she suddenly awoke in a violent alarm from a frightful dream, and complained of a dreadful pain in her head. Presently she jumped out of bed, attempted to open the window, and for a short time fainted. *On recovery she became raving and furious.* In about three weeks she was much recovered, but relapsed from over-excitement, and fell into a state of melancholy. Her

countenance was sullen and pale, the eyes heavy, turgid, and downcast ; the tongue foul ; the bowels inactive ; the pulse rather full and slow ; and the surface chilly. She answered few questions, and those only in monosyllables, and was very reluctant to move. Mercury was given to affect the mouth, and she improved considerably, but so soon as the salivation ceased, all the former symptoms became more intense, and certain cataleptic appearances were observed. She preserved the exact posture, whether lying, sitting, or standing, in which she was placed ; ate mechanically, and answered no questions. The skin was like white wax, and very cold ; the pulse was feeble ; the breathing scarcely perceptible. The arteries of the neck pulsated visibly. At last all these symptoms were suddenly aggravated ; she became a perfect statue ; sense and will were quite suspended ; the evacuations were discharged involuntarily ; the mouth was open, and saliva flowed from it in large quantity ; a sardonic grin distorted the features ; the eyes were immovable and imbedded in the upper eyelids ; every limb retained the position in which it was placed, even the most painful, and that for a time impossible to be preserved by any one in health. Ultimately, however, she recovered."

In the case next to be related, organic disease

existed, but this is not sufficient to remove it from the class of hysterical affections, for the madness was not due to the organic disease, that is to say, the organic disease in an ordinary person would not have produced madness, but in this girl, who possessed the hysterical constitution in a high grade, it was amply sufficient for this result.

HYSTERICAL MANIA.

A young woman, a patient of Dr. Babington, lay perhaps a couple of months in Charity-Ward, and at last died. The history of her situation before admission into the hospital was defective. She laboured evidently under some disease of the bladder or kidney, for she passed purulent urine; but the most striking point in her case was the peculiar mental alienation which she exhibited, a pretty fantastic Ophelia-madness. Soon after her admission she fell into a state of incomplete catalepsy or catopneus. She might be seen lying extended in bed quite motionless; her face pale as marble; her eyes dilated with "no speculation" in them, constantly fixed on the same point; the lips retracted and disclosing the teeth, which were almost in contact; the lips, teeth, and tongue, dry and sordid; the skin cool and dank; the pulse

exceedingly rapid. The expression of the countenance was perfectly placid, but shocking from its immobility, and the blackish-brown secretion collected about the mouth. On raising her arms, they remained about half a minute suspended in the air and then sank, a dead weight upon the bed. She appeared neither to hear nor understand anything that was said to her. Under the use of wine, serpentary, and ammonia, she partially rallied. For many days after, her condition was as follows:—She lay motionless in one position, making a low muttering or moaning noise. She appeared, through the mist that veiled her intellectual faculties, partly to recognise certain persons, and manifested a capricious dislike of some, and liking of others, who visited her. Thus, to the questions of the former she was obstinately silent, or answered only in a strangely irrelevant manner. To one person, who addressed her, she said, after a long pause, “I know you—you are a chimney-sweeper.” But when those whom she seemed to regard asked her whether she were better, she would reply, very slowly but distinctly, “Yes.” At a later period she became very fond of talking aloud to herself, and not always in the chastest manner. Sometimes she would ramble on for hours together in a loud violent tone, complaining of some fancied injury ;

sometimes she would suddenly break off, to sing, in a sweet plaintive voice, "Home—sweet home." During the whole of her illness the excretions were passed in bed. She continued in the state just described till her death. The examination disclosed the existence of a large serofulous abscess in the abdomen, connected with the kidney, and serofulous deposit in some other organs, but the brain appeared perfectly healthy, and free from serofulous tubercle.

Another form of hysterical insanity is beautifully described by Sterne. Nothing can be truer than the portrait which he has drawn of the poor witless maiden—nothing more touching. The Ophelia, too, of Shakspeare is a genuine character, and evinces deep knowledge of the human mind; and the fact is striking, that the poet has not been too solicitous to preserve an ethereal purity of thought and expression, which would be inconsistent with nature—for we find in such cases rather obscuration than exaltation of the moral sense: and this point has been well discussed, in reference to the character of Ophelia, by Göthe in Wilhelm Meister's Apprenticeship. Sterne's description, which I have above alluded to, is as follows:—

"When we had got within half a league of Moulins, at a little opening in the road leading to

a thicket, I discovered poor Maria sitting under a poplar,—she was sitting with her elbow in her lap, and her head leaning on one side within her hand—a small brook ran at the foot of the tree. I bid the postilion go on to Moulines, and La Fleur to bespeak my supper, and that I would walk after him. She was dressed in white, and much as my friend described her, except that her hair hung loose, which before was twisted within a silk net. She had superadded likewise to her jacket, a pale green riband, which fell across her shoulder to the waist, at the end of which hung her pipe. Her goat had been as faithless as her lover, and she had got a little dog in lieu of him, which she had kept tied by a string to her girdle; as I looked at her dog, she drew him towards her with the string. ‘Thou shalt not leave me, Sylvio,’ said she. I looked in Maria’s eyes and saw she was thinking more of her father than of her lover or her little goat; for as she uttered them the tears trickled down her cheeks. She had, since that, she told me, strayed as far as Rome, and walked round St. Peter’s once, and returned back; that she found her way alone across the Appenines; had travelled over all Lombardy without money; and through the flinty roads of Savoy without shoes; how she had borne it, and how she had got supported she could not

tell ; but ‘ God tempers the wind,’ said Maria, ‘ to the shorn lamb.’ Nature melted within me as I uttered this, and Maria observing as I took out my handkerchief that it was steeped too much already to be of use, would needs go wash it in the stream. ‘ And where will you dry it, Maria?’ said I. ‘ I will dry it in my bosom,’ said she, ‘ it will do me good.’ ‘ And is your heart still so warm, Maria?’ said I. I touched upon the string on which hung all her sorrows ; she looked with wistful disorder for some time in my face, and then, without saying anything, took her pipe and played her service to the Virgin. The string I had touched ceased to vibrate ; in a moment or two Maria returned to herself, let her pipe fall, and rose up. ‘ And where are you going, Maria?’ said I. She said ‘ To Moulines.’ ‘ Let us go,’ said I, ‘ together.’ Maria put her arm within mine, and lengthening the string to let the dog follow ; in that order we entered Moulines.”

Hysterical hallucination is a phenomenon occasionally witnessed. Thus Messrs. Griffin state, “ We recollect to have seen a young girl once, screaming in the most appalling fright, that there was a great gap in her neck, and that her head was falling off. Her terrified friends were about her, endeavouring to convince her of the absurdity

of her apprehensions. This, however, only served to make her grasp her head more firmly between her hands, and double her cries for assistance. By much intimidation, and by dashing cold water over her person, she was after some time forced to swallow a dose of castor oil, and as soon as it operated, was perfectly relieved from her hallucination."

The same authors speak of a girl, 23 years of age, named Mary Enright, who was frequently seized with a sudden blindness and giddiness. In a short time she regained the power of vision, and lost the giddiness; but her intellects remained confused, and fuddled as it were. She described herself as not knowing what she was doing, and saying all sorts of foolish things. This *quasi inebriation* lasted eight or ten days, after which time she perfectly recovered her reason. The general health was pretty good, the catamenia regular.

Messrs. Griffin also knew a young girl who was haunted by a spectral figure, which she described as standing by her bedside. She was frequently seized with fits of screaming, as she fancied it approached her, and kept her relatives in the greatest state of alarm and astonishment. A few active purgatives gave immediate and effectual relief.

Nearly allied to these hallucinations is that causeless fright or bewilderment which perpetually agitates the hysterical female. She feels, as she expresses it, like a thief with a constable at his heels. Another time she feels as though she had committed some enormous crime, which must draw upon her the detestation even of her dearest friends. Often influenced by a similar feeling, a wife will tell her husband that she has never fulfilled her duty towards him or her children, and she is convinced that he and they must hate her. Sometimes goaded by this idea, she attempts suicide.*

Occasionally the patient fancies that things go on with insufferable slowness. When a person speaks, he seems to drawl out his sentences, purposing to provoke her. If he approach from a distance, it seems an age before his arrival. Even when walking herself, though unable to do so without support, she feels hurried, and desirous of precipitating herself onward. The coaches seem to her to creep along the road, the steamboats to linger on the river. The rain only dribbles from the sky, and the lightning endures longer than is necessary.†

“Cases of this kind,” says Dr. Conolly, “approach near to insanity, and indeed a mind subject

* Dr. Gooch.

† Messrs. Griffin, p. 158.

to the violent agitations incidental to the hysteric constitution, cannot be considered as perfectly sane. We would here beg to insert a caution to which the young practitioner cannot pay too much attention. We are inclined to think that cases of hysteria, in which the mind was principally affected, have occasionally been treated as cases of simple mania, and the patient placed in confinement with lunatics. Nothing more likely to have the most unfortunate effects upon the patient could possibly happen ; and no care can be too great to avoid a mistake which would, in all probability, render such a case incurable and hopeless."

PUERPERAL MANIA.

What has been called puerperal mania, is, in fact, an hysterical affection, and by no means a complaint *sui generis*. Upon the mobile or hysteric constitution, the various alarming accidents which are apt to precede, or accompany, or follow delivery, impress an extraordinary change. The state of pregnancy is in most cases a state of mental excitement. A host of novel sensations fix the person's attention strongly upon herself—she watches with anxiety the development of every symptom that characterises this eventful epoch.

During nine long months she fears and hopes ; during nine long months she is devoured by conflicting emotions. That timorous but ardent expectation of the period which is to terminate, at so great peril to herself, the weary suspense, and either to bless or blast her aspirations ; that impatient and often rebellious longing for offspring, or gentle yearning to behold the features of her infant, and that speculative curiosity with which she meditates every possible conformation which it may assume, and in turns rejoices and shudders at the picture ; that estrangement from objects which so lately formed her occupation and amusement ; that avoidal of society, and domestic imprisonment ; that new relation between herself and husband, in which she becomes an object of unusual solicitude, for her safety is the safety of the future being ; in which their community of feeling is strengthened, or, if unhappily broken, re-established : these and other circumstances render, it is manifest, the pregnant female obnoxious to mental disorders. But when the critical time arrives, when it is at length passed, when the climax of joy or of despair is attained—of joy, it may be, alloyed by exquisite physical suffering ; of despair, intensified by undurable pain—or when that revulsion of feeling which the non-fulfilment of a terrible appre-

hension entails, agitates the mind, then we not unfrequently find that reason, whose armour had so long defied the angry goddess, is stricken to the heart by the last silver shaft from the bow of Lueina. But if we behold a happy and honoured wife agitated in mind and overwhelmed by distresses, and disturbed in intellect, what may we imagine to be the situation of her who, having yielded to the arts of the seducer, gives birth in seeret to the damning proof of an illieit amour? Deserted by her lover, the dreary period of preparation is passed unsoothed by the sweet sympathy and tender care of married affection; there is none to raise her drooping hopes, nor share her fervent desires, nor pour out in unison to the Author of all good the pious thanksgiving. Her days are days of gloom, and her nights are nights of horror. Her thoughts are divided between the past and the present. Images of earlier days, when her heart was light and her soul clear, arise in her meditations; then she hears the voice of the betrayer, and thrills again at the remembered tones, whose sweetness witched her soul to infamy. She recalls the golden time when the first confession fell like manna from the deceitful lips, which now perhaps stammer their hackneyed tale into a sterner ear. She recalls that happy, happy dream, only to contrast it with the sicken-

ing reality ; she remembers the joys of Paradise, while undergoing the tortures of hell,—

“Nessun maggior dolore
Che ricordarsi del tempo felice
Nella miseria.”

If her thoughts revert to her future doom, what is it? Insult, and infamy, and malediction ; excommunicated by society, sedulously shunned by one sex, and despised by the other, she is brought to think herself scarcely human, and more on a par with the brutes than man. If her reflections are occupied with her child, sin and punishment still stare her in the face. She has herself branded the infant's forehead with an indelible stigma, and shudders, lest from the lips of her own child should issue the blasting question, “Mother, where is my father?” and the hiss of execration at the prevaricating answer she must render. Hence we see how it is that the unmarried mother so frequently succumbs beneath the maladies which pass comparatively harmlessly over the respected wife. Hence in our medical tour, leaving the latter, whom we have found so tranquilly reposing in the bosom of her family, and, if I may say so, enjoying the luxury of convalescence, we cross the street to visit the former, in her narrow cell in the mad-house. Had we not traced her career through its

brief phases, never could we have recognised in that gaunt, repulsive figure the fascinating Amelia. Is that hoarse discordant laugh a mere mockery of the silver sounds with which we were once familiar? Are those glassy eyes the bright stars "that did mislead the morn," and that shrivelled bosom the hills of snow which a poet might celebrate? Are those tangled locks the golden tresses which Pyrrha would envy? Let us no longer contemplate the picture: one's heart bleeds at the terrible retrospect.

Dr. Robert Gooch has related some interesting cases of puerperal mania, from which I extract the following. "A lady, who, I was told, had had a brain fever after her former lying-in, came to London to be attended by me in her next confinement." The circumstances connected with her labour were auspicious, and nothing remarkable happened until the tenth day, when "the shop of a piano-forte maker in Oxford street caught fire; this occasioned a great bustle in the neighbourhood, but as her sitting-room did not look into the street, it was kept from her knowledge during the day; but in the evening, while she was standing at her window, which looked into a yard at the back of the house, a piece of burning matter fell within her sight. I saw her about two hours afterwards, at nine in the evening; she was not

herself; her manner was agitated. On being questioned about her feelings, she kept silent for some time, and then answered abruptly; her pulse was quick, and her look and manner odd and unnatural. I slept in the house. At four o'clock in the morning the nurse waked me, and said that her mistress had had no sleep; that she was sitting up in bed talking to herself, but that instant had expressed a wish to see me. I rose and went to her; there was only a rushlight in a remote part of the chamber; as soon as she saw who I was, she told me to sit down and look at her. I said 'I do.' 'What do you see?' 'Nothing but yourself.' 'Look at my head.' 'I do.' 'Do you see nothing particular there?' 'Nothing.' 'Then I was presumptuous; I thought that a glorious light came out of my temples, and shone about my head. I thought I was the Virgin Mary.' " After this she became more incoherent and violent, but having undergone judicious treatment, she recovered in about three weeks.

A second case is thus related: " A pale delicate lady, nursing an infant four months old, told me that she scarcely knew what was the matter with her. Her sight was so impaired that she could not read; her powers of attention were so much impaired that her household accounts were burthensome to her; that she often rang for the footman,

and when he came, she had forgotten what she had rang for. She said she had a good husband, sweet children, ample property—everything to make her happy—yet she felt no interest in life. She added, that if this went on thus, she should lose her senses. She had lost flesh, and had little milk. After a short time, she took it into her head that she had a fatal disease, and I was called out of my bed several nights to see her die. She told me that I was quite mistaken about her case; that she was sure she was dying, and that if I would sit down for five minutes, I should see her expire. She next began to accuse her friends, especially her husband, whom she charged with infidelity, and an intention to poison her; and it became necessary to separate her from her family, and place her in that state of seclusion and control usually employed under such circumstances. She continued in this state many months, but ultimately recovered, and has had a child since, without a recurrence of the disease.”*

* Dr. R. Gooch, Account of some of the most Important Diseases peculiar to women.

CHAPTER VI.

CAUSES OF HYSTERIA.

Thus drinking deeply in the soul of things
We shall be wise perforce. WORDSWORTH.

THE conditions requisite to the production of a fully-formed hysterical affection are, first, an inbred disposition, which is closely connected with inherited delicacy of constitution, or tendency to the disease; secondly, debility dependent upon any cause, as a fever, or an unwholesome life; and, thirdly, an immediately exciting cause. Thus a young person, born with a mobile constitution, and afterwards weakened by illness, and in this state subjected to a fright, becomes at once hysterical. But of these three links in the chain of causation, the first may fail: for a once perfectly healthy and vigorous person, if weakened by a very severe and protracted illness, and then suddenly shocked by the receipt of afflicting intelligence, becomes hysterical. Again, the second link may fail: for an individual of the mobile temperament, greatly excited, say by the abrupt announcement that she has succeeded to an im-

mense estate, becomes hysterical. Thus it is recorded, that a tragedian having exhibited in the Athenian theatre a drama, in which he introduced the Furies, represented by persons wearing hideous masks with snakes wreathed in their hair, and flaming torches in their hands, running in crowds over the stage, and uttering wild and horrid exclamations, many of the female spectators, stricken with terror, fell into convulsions; and the disorder was such, that the authorities not only forbade the repetition of the play, but imposed a heavy fine upon the poet. Mobile persons are liable to be thrown into an hysterical condition by a source of irritation which would not affect a healthy individual. Thus the presence of worms in the intestinal canal seems occasionally to be the immediate cause of these affections, and disordered states of the functions peculiar to the female is also very frequently a cause of the disease. So organic disease of almost any organ.

The immediately exciting cause may be of the slightest possible nature; thus how frequently do we find a highly excited state, bordering upon convulsion, induced in hysterical persons, who have ventured into a crowded church or concert-room. It is true, that we very rarely see actual convulsion in these cases, because the patient, awed by a sense of decorum, with the utmost force of her

will resist its attack. Yet, under other circumstances, an oppression of the chest, similar to that which is experienced on breathing air deteriorated by the expired effluvia of a multitude, will infallibly induce convulsion. Many other causes operate with equal energy. Thus the immediate cause of that strange affection which is related in an earlier part of the work, as *morbus mirandus*, was a slight blow received by the patient from her mother struggling in an apoplectic fit. The fatigue which follows a long walk, or prolonged standing, or exposure to heat or to cold, jarring or jolting of the body, loud sudden noises, mental disturbance, especially of that sort which common people endeavour to express by saying, “it gives them a *turn*.” In fact, there is scarcely any accident so trivial, but that, in an hysterical person, it may bring on hysterics or an hysterical affection. In a person predisposed to disease, anything will excite disease; so, to illustrate my meaning, is it with a heap of snow upon a mountain, which a bird flying over may precipitate to the bottom, because its base being already melted, it was predisposed to fall. Imitation, or the mere sight of another suffering from the disease, is often sufficient to induce hysterics.

The following story of the celebrated Boerhaave is related by his nephew, Kaau Boerhaave. It is

thus rendered into English by Dr. H. Manning, in his 'Treatise on Female Diseases :—“ A girl, an inmate of the poor-house at Haarlem, upon receiving a great fright fell into convulsions. Immediately all who crowded round, either to see or assist her, were seized in the same manner. For the space of two days the disorder continued to be propagated, attacking one person successively at the sight of another, till almost all the boys and girls in the house laboured under the paroxysm. The physicians of the place assembled, and prescribed the most powerful nervous medicines without any effect. At last Boerhaave is sent for; who observing in what manner the disease was communicated, resolved to try the force of an expedient which might affect the imagination. Accordingly, ordering several portable furnaces to be placed in the apartments, on which were laid burning coals, and hooks of iron, of a particular shape, he informed them, that since medicines had proved ineffectual, he knew of no other remedy than that the person who should be first seized with the next paroxysm, whether boy or girl, should be burnt in the arm with a hot iron as far as the bone. All were struck with such terror upon hearing this sentence announced, that when the paroxysm would again have seized them, they endeavoured with all their power to resist its

progress, and their resolution was attended with success."

A slight shock or jar of the body may induce the paroxysm. Thus Messrs. Griffin relate, that a patient under their care, Catherine Keating, aged 27, "was always obliged to creep about with the utmost caution, as the slightest bend or motion, an inadvertent step, or a pebble coming accidentally beneath the foot in walking, brought on pain in the breast-bone, which shot to the back, thence down her limbs, and was followed by a sense of faintness."*

M. Louyer-Villermay collected nine cases of regular hysterics, for the purpose of comparing their immediately exciting causes. He found that three could be traced to fright (accompanied in two cases with simultaneous suppression of the menses); two to crossing in love; one to lively emotion; one to violent jealousy (accompanied with simultaneous suppression of the menses); one to a cold; one to the game of *escarpolette*. M. Georget has collected twenty-two cases with the same object. He attributes thirteen to fright (accompanied in six cases with simultaneous suppression of the menses); seven to pungent grief (accompanied in one case with simultaneous suppression of the menses); one to violent displeasure;

* Op. cit. pp. 60-1.

one to no immediate cause,—the patient had been melancholic from youth. In some cases recorded by Dr. Griffin, the immediate cause was a sprain in the back, caused by carrying heavy weights.

I hope the fair sex will excuse me, if I hint also, that in a few rare cases the fit is produced by the lady's venturing upon *one* drop too much. I cannot refrain at the same time from alluding to another practice, in which some ladies indulge. Requiring a stimulant, without which they are convinced they could not survive twenty-four hours, and shrinking from the publicity which a supply of wine through the ordinary channel would give to their malady, they are fain to exchange the wine-merchant for the chemist. Thus, when they feel a little poorly, there need be no hesitation in taking "that odious draught," for what can be more innocent than "Tinct. card. comp." with its neatly written label, "To be taken as occasion may require. (?)". It is much to be regretted that this habit should prevail, and that ladies should seek "to keep their spirits up by pouring spirits down;" for unquestionably this dram-drinking in disguise, keeping up a state of artificial excitement, is calculated to do much mischief, and should be strongly reprobated and discouraged. Many a husband who smiles, when he sees his wife pour

out her “two tablespoonfuls” of the medicinal tincture, would frown if he saw her take a corresponding quantity of brandy. Yet where is the difference? The colour is not the same, and the flavour is somewhat altered, but the amount of ardent spirit is the same in both. We laugh, indeed, when, at the Lyceum, or in the hovels of the poor, we see Mrs. Gamp fetch her *tea*-pot from the cupboard, and proceed to pour herself from it a glass of excellent *Hollands* ; but we look on with compassion when my lady measures out an ounce and a half of some Galenical compound, and swallows it, not without wry faces. “The fact is,” we say, “she is so delicate. Poor thing! she is always taking that nasty physic. I wonder she lives through it.” And indeed it is quite singular, though in a different sense—which is less creditable.

But the grand cause of hysteria—that which puts out the eyes and lames the limbs, and distorts the features of the young and beautiful; that which prompts the canine bark, obstructs the breath, and wrings the brow with anguish; that which melts the women of England into powerless babes, lulls them into months of slumber, deforms the moral beauty of their souls, and shatters their intellect; that which stretches them moaning and struggling on the ground, or petrifies them into

living statues; that which will sometimes freeze every faculty of soul and sense, and, by destroying reason, level them with those that chew the cud—this grand traitor and foe to humanity is Polite Education. First, the boarding-school, then the saloon, the theatre, the opera—these are the focus of infection, the very den of hysteria. At school, the unhealthy confined life, the premature tasking of the mental powers, that excessive application to music, lay a foundation which is consolidated upon the young lady's entrée into society. What occurs then? Why a constant round of toilsome pleasure: like a squirrel in its wiry box, the maiden makes much motion, though but little progress. The waltz, the polka, a flood of music, enrapturing every faculty, a concourse of people with mirth in their faces, brilliant dresses, rapid vivacious conversation, the thus and frankincense of flattery—oh! it is delightful, ecstatic, divine! Yes, little bewildered one, it is divine, if Jupiter still sits upon Olympus, and pagan deities breathe impurity into our hearts, and receive adoration. Listen to the heart in thy bosom, how it throbs; question thy conscience, how it trembles. Hope, fear, joy, ambition, self-adulation, rebellion against authority, and a thousand conflicting emotions, disturb the serenity of thy mind. "He is my slave," says Vanity. "He is a Cræsus," adds Avarice. "He is odious to me," whispers Truth,

“and I cannot forget another.” “Can I forego a coronet?” asks Ambition. “How they will envy me!” sighs Pride. Alas! upon no sybarite-bed lies she whose body is enfeebled by nights of dissipation, and whose mind is polluted by the merenary schemes and lax morality of the gay world. Very sad, too, is the effect of that dishonourable flirtation which the beau monde excites and applauds. Infamous, indeed, is it, to wind one’s self round a trusting heart, and then, like the constrictor, to crush it between our coils! Infamous and despicable he who, beneath the glare of the chandelier and in the twilight of ante-chambers, waits and watches; who sighs and simpers with ready sympathy; who speaks with feigned embarrassment; is silent or eloquent, bold or timid by calculation; whose countenance beams with fictitious adoration, or expresses a studied languish; who, like a piece of rubbed sealing-wax, attracts the pith-ball, love, only to repel it instantly upon contact! Infamous, I repeat, and despicable, is that polished Judas! And who can heal the wound thus inflicted? Trembling like an aspen, the deserted maiden is carried before the physician. But can pharmacy cure the ills of flirtation? or what lotion can wash out love? Shall we combat melancholy by mercury? or endeavour to extract the stings of folly with the forceps? Idle thought and fruitless endeavour,

to heal a wounded mind, as we might a cut finger, by our patent balsam !

Anything that gives an undue predominance to the emotions tends towards hysteria. Hence young ladies who subscribe to the circulating library, and people their brains with heroes and heroines, who weep all day over imaginary distresses, or rejoice in unreal prosperity, who are instructed alternately in superhuman virtue and satanic vice, such young ladies see always the things that surround them as superlatives, and are superlatively affected by them. They are thrown into convulsions at the aspect of a cut finger, and a tight shoe gives them ineffable agony ; if a spider creep over their dress they make the welkin resound with shrieks. Should a friend notice a fault, it is a base betrayal of their friendship—malignant envy. If at a concert they hear a pretty air, they are in Elysium. With them all is limitless exaggeration. Contrast with this picture the next. Behold the Mohican chief bound to the stake ; the flames hiss over the faggots piled around him ; beyond the dense suffocating smoke are his enemies, who, with fiendish cries, run round their victim, and taunt his agony. Awhile the Mohican is silent, and then he begins with no trembling voice the long prepared war-song. Defiance and unquenchable scorn and loathing of his enemies are the burden

of his chant ; no torture they can devise mitigates his contempt, and thus he dies as he lived—an impersonation of the Stoic's dream.

Excessive indulgence in music is quite pernicious, tending as it does unduly to exalt the emotions, and unduly to enfeeble the judgment. Those who have read Tennyson's poem, the Vision of Sin, will conceive what is meant. Certainly the luxury of sweet sounds is frequently too great for feeble souls ; there is a seduction in music of a particular stamp, a suggestiveness (whence it proceeds I know not), and even an immorality. Can we suppose that melody is all heavenly ? No. There are airs which have issued from the very centre of Erebus—airs which contaminate the ear and confound the soul—airs which are pollution itself.

Do you remember the cathedral scene in Faust ? The organ peals—Margaret, prostrate on her knees, attempts to pray, but the fiend stationed at her ear turns her supplication into impious despair. Have you never felt the like ? Have you never had moments when music seemed to inspire you to unholy enterprise ? How frequently, then, must this happen with the ardent temperament of the "weaker vessel." Music, as it is capable of inspiring happiness, is also pregnant with misery : it is an instrument of great good and of great evil.

CHAPTER VII.

TREATMENT.

Since man
Was first created, hath he fondly striven,
But striven in vain, with never-wearied zeal,
To check my conquests and elude my power.
Thus some their plantane or their smallage bring,
Lettuce or purslane, horehound, nettles sharp,
Fen-gather'd lentils, or the Persian weed,
Lecks, scallions, henbane, poppies, or the rind
Of ripe pomegranate, frankincense, and fleawort,
The root of potent hellebore, or nitre.
Some, steep'd in wine, the husks of beans prescribe,
Or spawn of frogs (a sovereign cataplasm),
Carrot, or pimpernel, or barley-flour,
Or gall of cypress trec, the healing dung
Of mountain goat, or still more fetid man,
Colewort, or gypsum, or the well-known sand
Of Asia's powerful stone, with bean flour mix'd :
Others, sagacious tribe, call in the aid
Of weasels, toads, hyænas, ruddocks, stags,
And foxes, every metal, and the tears
Distilled of every tree ; boues, nerves, and skins
Of every beast, milk, water, marrow, blood.
A potion some of four ingredients, some
Of seven or eight prefer. Some oft repeat
The sacred bitter. Some the crystal spring
Revisit, hopeful : others trust to spells
And panaccas, which at fair and mart
The Jew exhibits to the gaping throng.
Meanwhile I laugh, and bid the fools go weep,
Who mock me thus and but incense my rage.

LUCIAN'S *Tragopodagra*. Translated by *Francklin*.

IN the present chapter it is my design to notice
what appears to me the rational mode of treating
the two diseases, or rather the two varieties of

one disease—chlorosis and hysteria. Without doubt, in perusing the foregoing register of cases the reader has been struck with the singular inefficiency of the treatment employed. He has remarked the fact that whenever a patient has been bled she has become worse—whenever she has taken mercury she has become worse. He has observed also that other drugs, among which have been enumerated strychnia, quinine, arsenic, purgatives, &c., have failed entirely to ameliorate her condition; and therefore, I presume, he has felt considerable surprise in meeting with these words which so frequently occur in the narration of apparently utterly hopeless cases, “the patient, however, ultimately recovered.” Spontaneously the question rises to one’s lips, “what if the patient had swallowed *no* physic? What if one had never undertaken the apparently futile task of curing the disease? What if one had confided more in Nature and less in knowledge? Would the result have been less happy? Is it not possible, on the contrary, that the cure would have been effected at a much earlier period?

“Sanat ægros Natura, curat Medicus,”

is a motto prefixed to one of his works by the friend and physician of the king of Prussia—the illustrious Hoffman: “the physician tends the sick, but Nature heals them.”

Many a grievous error would have been avoided, had this maxim properly impressed the minds of all who approach the sick. It is not the duty of the physician, immediately that he has detected the name and nature of a disease, to repair to his medical armoury, and girding him with his favorite weapon, attack, "tierce and carte," according to the laws of the medical duello, the enemy, as he terms the disease. Most ridiculous indeed, and not unmischievous, are the figurative expressions which we so commonly hear. The lecturer on medicine exhorts the pupil to lose no time in *combating* the disease. The instant the malady shows itself, *aux armes!* is the cry—we rush to the encounter; driven back at the first attack, we retire, but scorn to yield,—“Once more into the breach, dear friends, once more;” and flourishing our weapons, we precipitate ourselves a second time upon the foe. A friend of mine, since dead, told me that, labouring under an *attack* of jaundice, he consulted an Oxfordshire physician of local celebrity. “Go home,” said the physician, “get to bed, and I will come and fire away at you.” In fact he did fire away at him; but his musket, mercury, being indiscreetly handled, did more mischief to the patient than the disease.

A gentleman, who had just seen a patient

ordered his assistant to compound a mixture. "Put into it," said he, "a little opium, a little arsenic, a little prussic acid, a little strychnia, and a little quinine. These," he continued, smiling, "I call my great guns, and it will be hard indeed if they all miss fire." Thus, it appears, that all this artillery-talk is not mere flourish of metaphor, but has a very evil influence upon actual practice. Disease is considered an enemy; drugs are held to be weapons, as it were, and physicians are the soldiers who are to wield these weapons for the defence of their compatriots. Hence the sole reliance of the soldier-physician is in his weapon, his drug, which he grasps on the first signal, and never abandons, as long as he perceives a glimpse of victory. And this is another example added to the long list of empty words which have deluded mankind into a strange excess of silliness. I imagine that a physician will confer much greater benefit upon a chlorotic or hysterical patient, if he expressly abandon all hope of *curing* her, than if he attempt to effect this object by dint of the cleverest medication. Nature alone can cure. What, then, is left to the physician? A most important office. He is the instructor of the patient and of the patient's friends. He teaches them what to avoid; he points out what influences are injurious, and therefore proper to

be removed: he explains what conditions are favorable to recovery, that the patient may, in all practicable cases, be surrounded by them. Sometimes he has recourse to drugs, but not for the purpose of curing the disease, but with the object of removing obstructions which retard the workings of nature. Thus the bowels must be regulated: but here great caution should be observed to avoid vexatious interference, which unfortunately is exceedingly prevalent in medical practice. Watchfulness, sleeplessness, symptoms of an excited condition of the brain, call for the occasional employment of narcotics, which, however, should be used with great reserve, and only when urgently required; for it frequently happens, that the narcotic given for the purpose of producing sleep, is the very cause of the sleeplessness; as it very commonly happens that purgatives, which have been long continued, cause a constipation which is immediately relieved by their omission. If the patient exhibit marked pallor of countenance, indicative of the absence of iron from the blood, it may not be imprudent to administer a supply of this metal. It must be remembered, however, that since the cause of the pallor is still in operation, this cause will again expel the metal, as quickly as it is imbibed by the blood. If acidity of stomach vex the patient,

temporary relief may be procured by alkalies. If the appetite be diminished, bitters may assist us. It is needless to enumerate in detail the symptoms which may be palliated by remedies—*sparingly* employed; these are familiar to every practitioner. It is equally needless, as it would be beyond the scope of this work, to describe the various methods of relieving a patient suffering from any form of hysterical fit. The objects to be attained are, generally, to prevent the patient from inflicting any injury upon herself or others during its continuance, and, when possible, to cut short the paroxysm. The affusion of cold water, a most powerful anti-convulsive, the administration of stimulants, as ether, ether with laudanum, hot brandy and water, the inhalation of chloroform, and other proceedings familiar to those conversant with the medical art, will of course be employed in turn. These need not detain us: but we hasten to consider the general plan of treatment, independently of those minor accidents or episodes which require special handling. Our object is, then, to surround the patient with all healthy influences; and first let us speak of physical influences.

The clothing is a proper object of attention. We ought to see that the dress be sufficient to protect the person from cold, but also that it do

not run into the opposite excess ; that the patient do not, by loading herself with garments, heat and oppress the body. We must take care that the motions of the chest be not hampered by that astounding absurdity—a tight corset ; nor, in fact, ought we to consider it beneath us to pay regard to the minutest article of female attire. The patient's diet is worthy of all attention. It will, in my opinion, be wise, in perhaps the majority of instances, to allow this to consist principally of light farinaceous nourishment. In the fruit season, a few strawberries, cherries, or other wholesome fruit, will generally prove a grateful and refreshing addition. A small quantity of meat, plainly cooked, need not, however, be interdicted, if the patient have an appetite for it ; but light puddings made of rice, tapioca, sago, bread-puddings, with milk, &c., are perhaps especially to be recommended. Strong tea and coffee should be forbidden, and wine, and all sorts of liqueurs absolutely forsworn. Deviations from this kind of diet must, of course, be occasionally permitted under unusual circumstances. It is most important to enjoin the observance of regular hours. I would never allow a patient to be up after ten o'clock in the evening, nor in bed after six in the morning. Balls, concerts, theatres, exciting exhibitions of every kind, react very injuriously on the system,

and consequently the patient is not to attend them. Pure air will evidently form an essential item of the treatment. Hence, and for other easily comprehensible reasons, our patient should, if possible, in *most* cases be sent to reside in the country, and particularly in hilly or mountainous districts. Exposure to the light of the sun, as it contributes to maintain a person in health, so also it contributes to restore him to health when sick ; hence the patient's chamber should be light, as well as airy and spacious. The windows should not be muffled by blinds, nor the bed with curtains. Neither should the patient's *mollesse* be kept up by down beds and soft pillows : a hard bed and equally hard pillow are excellent inducements to shake off the sluggish habits, which, originally produced by the malady, tend afterwards so powerfully to perpetuate its influence. Exercise and *work*, apportioned to the patient's strength, must by no means be neglected. Let her, unless the disease have advanced so far as evidently to forbid it, let her, I say, take frequent and *long* walks. It is perfectly useless to dawdle about with a campstool, or in an invalid's chair, or idly reclining in a carriage ; active progression is necessary. One hour's brisk walk is worth forty hours of lazy lounging. Our object in recommending exercise is to accelerate the pulse, to expand the lungs, to

force a larger quantity of the vital air into the blood, to work the muscles, to pump out the secretions, and to give the cheeks the vulgar hue of a cabbage-rose. In short, we wish to exalt the energy of all the natural functions. Now is it reasonable to imagine that we can effect this result by an hour or two spent in sauntering through the fields, especially when we consider ourselves justified in recruiting our exhausted strength by reposing on the sofa the rest of the day? Health, like every other prize, is only to be purchased by exertion. Exercise on horse-back is not proper for every female, but in those cases in which it can be allowed, it is invaluable. A gallop over the turf will do more good to an hysterical patient than an ocean of physic. As soon as her foot touches the stirrup, her spirits will begin to rise; and when, borne along by the flying steed, she feels the cool air fan her cheeks, and passes like the wind over the furzy common, she will experience a feeling akin to exultation; and although perhaps almost breathless when she dismounts, she will acknowledge that she feels happier than she has been for many a long day. Employment in the open air, even actual *labour*, is much to be encouraged. Why should my lady scorn to rise at five to milk the cows? Why should she be afraid, spud in hand, to traverse the meadow,

and uproot thistles? Why should she not hoe, and harrow, and dig? The spade that she handles will certainly turn up a treasure, to her more important than gold or jewels,—I mean health. It is not necessary that her fingers should be polluted by a vulgar instrument; let her, if she please, have a spade manufactured with a blade of silver, and a handle of ivory; that at least will not be plebeian. Then, again, she may play the “Lady of the Lake;” there will be as much pleasure as exercise in propelling the light shallop through the waters, and though her arm will at first soon weary, yet a little patience, and she will quickly acquire sufficient dexterity for her purpose. There are indeed a thousand ways of using our arms and legs, if we will condescend to take advantage of them, and acknowledge that in this respect no privileges distinguish a duchess from a gipsy. A short stay at the sea-side, and a daily dip in the sea, will often effect great good, especially if the hysteric or chlorotic affections be complicated with a scrofulous taint. It must, however, be carefully remembered, that the object in bathing is to produce a vivid reaction; that is to say, the first impression of cold should be followed by an universal glow and sensation of warmth and comfort. Unless this glow occur, bathing is rather injurious than beneficial. A

short voyage will sometimes have the happiest result. A month or two at sea will occasionally effect a complete revolution in the physical frame. The previous languor and debility are shaken off, and a general vigour of body and mind are established. If neither of the above measures be resorted to, some of the hydropathic processes may be followed—with care, however, and caution. The shower-bath, what is called the “*abreibung*” —the can-douche, and afterwards, according to the effect upon the system, the great douche itself, have frequently produced, as I can vouch from personal observation, singular benefit. I do not think it advisable to make the patient travel; for though change of scene may perhaps act favorably, yet the fatigue and annoyances of travelling more than counterbalance any advantage of this kind. I now approach a part of the subject, which I conceive to be of great importance, and I approach it with considerable anxiety: for it has never received that attention which I think it claims, and I am fearful that I may not sufficiently clearly or sufficiently convincingly develop my idea. One hears so little spoken among medical authorities of the moral treatment of disease, that it almost seems as though they considered such treatment far remote from their province. Surely this is not the case. Surely we cannot imagine that a physician's work

is accomplished when he has felt his patient's pulse and seen his tongue. No, nor is it completed when he has sounded his chest and manipulated his abdomen, and examined his secretions.

There is yet an important matter to investigate, far more difficult indeed to approach, and satisfactorily elucidate, but not on that account to be omitted. We have to look into the patient's mind. There, when we have in vain scrutinised the physical frame, we may frequently discover the cause of the malady by which he is devoured. We may find him the victim of a mental cancer, and perceive that it is that inscrutable sympathy between mind and matter which wastes his frame, and gives that haggard expression to his countenance. Having made this discovery, are we to turn on our heel, muttering the trite quotation, "Canst thou administer to a mind diseased?" and so abandon the sufferer? This course, I think, our duty clearly forbids, more especially in the class of cases of which I am especially treating. In a great multitude of cases, hysterical and chlorotic affections originate from excitement of the mind, from overwrought emotion. Many proofs of this have been adduced in the foregoing sheets; but I may not omit to mention one other, which made a great impression upon me, when I first heard it. In a late visit to the asylum for the insane at Hanwell,

I saw in the wards a young woman, named Maria Hine. She was 38 years of age, but she did not appear 30. She had a nice-looking countenance, which beamed with kindness and good temper. Her history was as follows:—On the 15th of January, 1849, she was sent from the workhouse to the Asylum. Pursuant to the system there followed, her strait waistcoat was immediately removed, and she was escorted to her apartment, a light, cheerful, airy, and comfortable place enough. She was visited by her benevolent physician Dr. Conolly, and treated with that systematic kindness and attention which are conspicuous throughout the establishment. She had religious delusions, was melancholy, and depressed in spirits, weeping continually; she complained bitterly of the severe treatment to which she had been subjected in the workhouse. The measures employed for her relief had so good an effect, that on the 19th of February she was dismissed well. On the 5th of March she was readmitted, in a state of high maniacal excitement. It appeared that her husband, a sailor, had gone to sea, and that since his departure her relatives had treated her with such harshness as to bring on this dreadful attack. I am happy to add that the poor creature, under the unwearied care of her attendants, is now rapidly recovering. Having, there-

fore, this and similar cases before our eyes, must we not allow that the treatment of chlorosis and hysteria, which itself frequently rises to the height of mania, is quite incomplete unless we attend as anxiously to the mind as to the body? It is, I believe, our duty to inculcate upon the relatives and friends of our patient the necessity which exists for the manifestation of the most patient kindness toward the sufferer. They must not allow their affection to be alienated by those little caprices which are in fact part of the malady. They are bound to soothe the excited mind, to calm the irritated temper, to permit even the explosion of unreasonable wrath to expend its vehemence, and to dispel by true sympathy the black clouds which descend upon the soul. It is the office of the tender relative to extract from the patient's bosom the secret, perhaps jealously guarded: and this secret how often will it prove to be wounded affection, or some circumstance deeply distressful to a sensitive mind! A lady whom I knew suffered from the most dreadful depression of spirits. She would weep for many hours together, and frequently spent the whole night in tears. Her despondent and even abject humility of mind was most painful. It appeared to her that she evinced strange presumption in burthening the earth with her useless presence.

The cause of this malady dated several years back. It originated in the death of a dearly beloved mother.

There is at this moment an affecting case in the Asylum at Hanwell. A poor woman of colour had spent the whole of her previous life in the service of an English family. The family had occasion to come to England, and brought over their servant with them; but when they reached these shores, they dismissed poor Mina. Abandoned by those she loved, separated from the children whom she had nursed, and for whom she would willingly have laid down her life, silly Mina, one is not surprised to hear, very soon sought refuge in Hanwell. As often as the physician pays her a visit, and puts the usual question, "How do you do, Mina?" he receives one and the same reply. "Pretty well, sir. Have you heard from the *family* lately?" Mina has not forgotten those who forgot her. Things of this sort impress one strongly with the principle, that those cases of hysteria also, which are but one degree below insanity, and which usually originate also in some great convulsion of the mind, are not to be successfully treated by a mere routine administration of remedies. We should acquire the patient's confidence; and then, masters of her secret, we are enabled frequently, though generally, of

course, powerless ourselves, to point out to those in whose hands the remedy lies, the root of the mischief, and the course necessary to be pursued if we wish to restore our patient to health. It will not always be possible to remove the cause of the malady; thus in the case of a girl, named Lindegren, a nursery-maid, seventeen years of age, lately dismissed cured from Hanwell. This girl, a person of somewhat ambitious character, and very anxious to rise in life, became temporarily insane from the grief and excitement which affected her on learning that her parents had unexpectedly become reduced below their former station; yet the knowledge of the cause of her affection rendered it more easy to treat and to cure her. However this may be, perhaps the most important feature in the treatment of the maladies of young females is that which I fear is most frequently overlooked or neglected, viz. the gentle consideration and tender sympathy of those about the patient. I do not wish to have it inferred that a patient is absolutely to domineer unrestrainedly over a whole family, nor to display unchecked the wild caprices of her malady. The observance of a due medium between stern coercion and unlimited indulgence constitutes, perhaps, the great difficulty which we have to encounter. It would be as injurious to the patient to allow

an hysterical female complete license, as it would be oppressive to her friends. What we have to do is to restrain her from indulging in the weakness or violence of her malady, by a certain moral influence. Remembering that almost ever the disease originates in a preponderance of the impulsive over the reflective faculties, our task appears to be to restore this lost equilibrium. This, in fact, is an arduous enterprise : it involves the attempt to re-educate an ill-educated mind ; to weed from it that false philosophy in which it has been entangled ; to implant clear and just ideas of life and of duty ; to elevate and purify the soul. Now, to effect this grand object, it is needless to point out, that a mere series of moral admonitions, come they from whom they may, or abstract disquisitions on the "whole duty of woman," are quite unserviceable, and even calculated to disgust those whom they are intended to benefit. It is evident also that the first point which must be gained by any one who imposes on himself the task of healing the afflicted mind—the first point and the most difficult—is to acquire the esteem and affection of the patient. Unless this first step be satisfactorily made, all is hopeless ; but this step once made, the onward path becomes less thorny. The benevolent mentor has then to study the mental peculiarities of his scholar,

and shape his course accordingly. He will probably, by various means, according to various circumstances, endeavour to fill his pupil's mind, to present to it some object or objects which may worthily employ the idle faculties. He will perhaps engage them in the contemplation of the wonders of Nature. He will lead his *protégée* into the fields, and fascinate her attention as he expounds the mysteries of flowers, and teaches the simple laws which govern their growth and increase; he will enable her to read from the spiral shell or flinty fragments, which she finds crumbling from the chalk cliff, the history of bygone ages, and the transformations of the earth; or directing her gaze to the "glad stars," he will treat of the motions of the spheres, and show how the same law by which a stone falls to the ground, keeps the planets revolving in their orbits, and maintains the equilibrium of the universe. A fragment of glass will enable him to split a ray of light into numberless divisions, to make manifest to the senses the minute beings that people a drop of water, or to bring within the sphere of his pupil's vision the inconceivably distant stars. Thus ennobling her mind, and raising it above the pettinesses by which it was once agitated, he will infuse serenity into her bosom, impart vigour to her intellect, and enable

her gradually to master the turbulent passions to which she was lately a prey. However, not to all dispositions are such lofty thoughts adapted: the discerning instructor will regulate his course in accordance with individual temperament. He will seek to occupy the mind in some steady pursuit, and to inspire the soul with an ambition to excel in some province, however lowly. While the fervour of charity induces one to visit the humble cottage, and pour her offering into the lap of sickness and misery, or to become the instructress of the little urchins of the village, another, less gifted, is equally earnest in acquiring the subtleties of crochet, or in working with dexterity Berlin wool: and even this employment, projecting upon an external object that attention which would otherwise be wholly directed to herself, is beneficial in its tendency. For nothing is more pernicious than to wrap one's self in one's own feelings, to luxuriate without reserve in happiness, or to meditate uninterruptedly on misfortunes. It is this self-involution which constitutes the hysterical mind—it is this Hindoo paradise from which we would liberate the captive. Hence, therefore, we should endeavour to tear the patient from herself, and to absorb her thoughts, were it even by Berlin wool. In this sense there is truth in Dr. Samuel Johnson's remark, "Woman,"

he said, "is happier than man, because she can hem a pocket-handkerchief." Unfortunately, however, though this resource, it is quite true, remains open to her, how rarely does she fly to it! Nor can I remember an instance where a weeping heroine has endeavoured to alleviate her woes by darning the handkerchief which she had just applied to her eyes. If she *would* do it, there might perhaps be virtue in the great lexicographer's panacea.

THE END.

